

# REPORT

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## THE EFFECTS OF THE IMPLEMENTATION OF THE DISABILITY ASSESSMENT SCHEME BASED ON THE BIOPSYCHOSOCIAL MODEL



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*A note on translation:*

*This document was originally prepared in English by experts and was adopted by TFL. In the event of any inconsistency between the English language version and the translation into any other language, the English language version shall prevail.*

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# Table of content



<b>1.Executive Summary.....</b>	<b>07</b>
• Summary of Key Findings by theme.....	09
• Summary of Recommendations.....	12
<b>Introduction.....</b>	<b>17</b>
• Objectives and scope of work.....	21
• Methodology.....	22
<b>I. Part 1.....</b>	<b>26</b>
1.Key economic and legal findings and recommendations.....	26
2.General recommendations.....	48
<b>II. Part 2.....</b>	<b>49</b>
• Key financial findings and recommendations.....	49
• Financial analysis.....	53
<b>Annexes.....</b>	<b>85</b>
• Legal Framework - Context and Analysis.....	85
<b>References .....</b>	<b>100</b>

# Tabelat dhe grafikët



<b>Table 1:</b> Number of semi-structured interviews.....	23
<b>Table 2:</b> Labour Inspectorate - Employment of persons with disabilities.....	40
<b>Table 3:</b> AKPA - Employment of persons with disabilities.....	40
<b>Table 4:</b> Cost of the Goals of the PWD Action Plan.....	54
<b>Table 5:</b> Funds spent from the state budget for the period 2019-2024 for the PWD category.....	55
<b>Table 6:</b> Number of PWD beneficiaries and caregivers & budget funds 2019-2028.....	56
<b>Table 7:</b> Average number of persons with disabilities benefiting from disability payment and care service, 2019-2023.....	57
<b>Table 8:</b> Number of integrated services and budget funds spent for the period 2020-2024.....	63
<b>Table 9:</b> PWD beneficiaries of social care services provided in public residential centers and budget funds spent and planned during 2022-2028 in lek.....	65
<b>Table 10:</b> Beneficiaries of services in social care institutions by categories.....	66
<b>Table 11:</b> Budgetary expenditures of the product “Persons from disadvantaged groups employed by social enterprises”.....	71
<b>Table 12:</b> Statistics on the number of students with disabilities and assistant teachers in public schools.....	74
<b>Table 13:</b> Expenditures for students with special needs in Resource Centers 2019-2028... ..	75
<b>Table 14:</b> Expenditures for children in need and students benefiting from free textbooks 2019-2028.....	76
<b>Table 15:</b> Statistics on the number of registered unemployed job seekers by educational level and gender.....	78
<b>Table 16:</b> Job seekers benefiting from employment promotion programs and budget funds spent .....	79
<b>Table 17:</b> Funds spent from the state budget for categories of PWD.....	79
<b>Table 18:</b> Jobseekers benefiting from vocational training programs.....	80
<b>Table 19:</b> Objective 1 and its cost.....	81
<b>Table 20:</b> Spent and planned budget for the period 2019-2028 for Legal Aid.....	83
<b>Table 21:</b> Compatibility of the principles of the Convention with constitutional rights in Albania.....	87



<b>Graphic 1:</b> How do you feel about communication with health professionals?.....	30
<b>Graphic 2:</b> Adequacy of financial resources.....	33
<b>Graphic 3:</b> Standardization of manuals and guidance on biopsychosocial assessment.....	34
<b>Graphic 4:</b> Which part of the assessment do you consider most challenging?.....	38
<b>Graphic 5:</b> Have you participated in any training on the psychosocial model?.....	38
<b>Graphic 6:</b> AKPA- Employment of people with disabilities.....	41
<b>Graphic 7:</b> Cases that received free legal aid.....	45
<b>Graphic 8:</b> Proportion of beneficiaries by disability category.....	57

# EXECUTIVE SUMMARY

This report provides a comprehensive analysis of the disability biopsychosocial approach and its effects following concerns raised by disabled people about the effectiveness of its implementation. It highlights weaknesses and gaps in how the model is applied. It also, provides recommendations that are not aspirational statements but concrete, actionable measures drawing on best practice from other countries to address existing challenges and enhance the effectiveness of the model.

More than one in twenty people in Albania, around 140,000 individuals, are disabled, and this number continues to grow as people live longer and medical treatments and technologies advance. More than 11.8 million euros are allocated by the government to support the needs of disabled people. However, only 3.2% of the funds allocated for the period 2019–2024 can be tracked based on the data currently published by the Government. Although disability related spending has increased by 24% between 2019 and 2024, the number of beneficiaries has decreased by 2,684 individuals receiving payments, raising concerns about the effectiveness of government measures and the tools used for budget implementation. These concerns are further amplified by the absence of performance indicators for the reform, which calls into question the mechanisms the Government is using to measure progress and address gaps in the coming years.

Developed with input from a wide range of stakeholders including the Ministry of Health and Social Protection, local government units, the Commissioner for Protection from Discrimination, the Ombudsman, the Commissioner for Data Protection and the Right to Information, as well as non-governmental organisations working in the disability sector this exercise, refined over many months, aims to support policy experts, human rights advocates, Non-Government Organisations, and others in identifying gaps and addressing them in a cross-cutting strategy. It will also assist government departments in contributing to practical and lasting change that can make a meaningful difference in the lives of disabled people across the country by drawing out a concrete action plan with clear and detailed success indicators.

This document calls on the Government to recognise and value the contributions of disabled people, and to listen and respond to their needs. It is also a call to action across society as disability is everyone's business.



This assessment is composed of two parts.

## Part 1

Examines the current situation in Albania, including economic and legal framework concerning disabled individuals. It is complemented by primary data collected through interviews with key stakeholders, which inform the recommendations and potential changes to the existing legal, strategic, and operational framework.

## Part 2

Identifies gaps and challenges in the disability related budget for the period 2019–2024, considering the National Action Plan 2021–2025, as well as various monitoring reports on budget implementation. It presents financial data intended to inform adjustments to the next annual budget, particularly in relation to expenditure in the disability sector. It also provides recommendations on improving the availability of data to enable more effective monitoring of budget execution

## Summary of Key Findings by Theme:

### GOVERNANCE

**Finding 1:** National Council for Disabled individuals (The Council) is characterized by irregular functioning, limited influence on decision-making, lack of transparency, and insufficiently inclusive representation. Stakeholders' recommendations often remain procedural formalities and are not followed by actions or implementation mechanisms from the responsible institutions, particularly in relation to biopsychosocial assessment.

**Finding 2:** There is a lack of transparency regarding the benefits and challenges of the pilot project implemented in three districts initiated since 2017<sup>1</sup> to introduce the new biopsychosocial scheme, as well as how these challenges were addressed when the scheme was scaled up to a national level. There is also a lack of clarity and no available evidence demonstrating that an assessment of capacities, human resources, accessibility, including homes and other care settings for disabled people, and overall needs was conducted prior to transitioning from the old medical model to the new biopsychosocial scheme.

**Finding 3:** Insights from most stakeholders indicate that the capacities and services offered to disabled individuals are often lower than those recommended by the Multidisciplinary Commission. There is a lack of alignment and cohesion between central and local institutions, particularly in terms of human resources skills and time, and infrastructure which does not correspond to the needs of disabled individuals. This raises concerns about the practical effectiveness of implementing the biopsychosocial approach. A major concern raised by stakeholders is the significant lack of mental health centres, which remain largely absent in many cities and towns across Albania.

**Finding 4:** There is a siloed and fragmented approach within the Multidisciplinary Commission when assessing the disability-related needs of applicants. Inputs from general practitioners, specialist doctors, medical centres providing in kind services, and employment agencies are often missing, resulting in decisions that can be inaccurate and inconsistent even for applicants with similar disability conditions. The lack of automated tools makes it even more difficult for the relevant parties to provide and store information in a central system. This limits the Multidisciplinary Commission's ability to base its decisions on an applicant's full history and to use the collected data to produce accurate reports on applicants' progress, as well as to identify national needs related to capacities, services, and infrastructure.

### STRATEGIC

<sup>1</sup>The biopsychosocial scheme in Albania was initially piloted in the municipality of Tirana (Units 6 and 7) followed by Durrës and Elbasan.

**Finding 5:** Social Administrators play a vital role in implementing biopsychosocial approach and supporting disabled individuals in Albania. However, their effectiveness is limited by resource shortages, insufficient training, and the lack of automation and standardized documentation. These gaps make their work inefficient, forcing them to focus more on bureaucratic tasks rather than on supporting disabled individuals by informing them of their rights and the benefits to which they are entitled.

**Finding 6:** Although included in the legal framework since 2023, the Social Employment Fund intended to promote the employment and inclusion of disabled individuals in Albania has not yet been activated or implemented in practice.

**Finding 7:** There is a perception among key stakeholders, that medical diagnoses continue to determine the classification of disabilities. This persists despite the aim of the new model, which promotes a holistic understanding of health and illness by considering not only biological factors but also psychological aspects such as thought and behaviour.

**Gjetje 8:** There are contradictory data provided by different government institutions, such as the National Agency for Employment and Skills and the State Labour Inspectorate, creating confusion about the actual employment situation of disabled people in Albania. Moreover, we were unable to obtain primary data on employment progress or on future strategies to improve employment outcomes for disabled people, due to the limited capacity of AKPA staff to participate in our interviews.

**Finding 9:** There is an ambiguity between different legal acts, which leads into practice to confusion regarding the mandatory requirement for the applicant's physical presence before the Multidisciplinary Disability Assessment Commission. In cases of severe disability, this requirement creates significant logistical difficulties and additional costs, particularly for individuals living in rural areas with limited transport options. Moreover, no budget has been allocated to cover the expenses for members of the Multidisciplinary Disability Assessment Commissions to visit applicants in their place of residence when such visits are necessary.

**Finding 10:** The Notification of the Decision issued by the Medical Commission for the Assessment of Disability does not include all the essential elements required for an administrative act. Moreover, the approved format currently in use lacks clarity.

**Finding 11:** Although the funds allocated to persons with disabilities and their caregivers by the Ministry of Health and Social Welfare have increased from 15.86 billion AL in 2019 to 19.6 billion AL in 2024, the number of beneficiaries has decreased by approximately 2,864 individuals, raising concerns regarding the efficiency of public expenditures in this area. Direct cash benefits for persons with disabilities range from 10% to 21% of the national average wage and remain substantially lower than those provided in comparable EU countries. Furthermore, the absence of indicators limits the ability to measure effectiveness and impact. There are a lack of clear implementation guidelines and a fragmented administration of social funds at the municipal level.

**Finding 12:** Despite the existence of the current legal framework that mandates the employment of people with disabilities, and the establishment of the Social Employment Fund, the implementation of these policies remain minimal and ineffective. The number of registered unemployed people with disabilities declined significantly from 542 in 2019 to 237 in 2022. At the same time the number of employed people with disabilities has drastically decreased from 82 in 2019 to only 18 in 2022. State budget allocations for employment promotion programs targeting people with disabilities account for only 1% of total expenditures, reflecting a consistent trend over time. The social enterprise policy has been implemented with delay and has so far produced limited tangible impact.

**Finding 13:** The number of assistant teachers has increased substantially from 620 in 2019 to 2,167 in 2024, with estimated expenditures reaching 2.34 billion ALL in 2024. At the same time, contradictions in the data are observed alongside a significant decline in the number of students enrolled in resource centers, from 700 in 2019 to 160 in 2024, despite increased spending allocated to these centers. There is no structured performance assessment of the resource centers to evaluate their effectiveness and impact. Data provided by the Ministry of Education are partial, unclear, and in certain instances contradictory, particularly regarding scholarship schemes, the provision of free textbooks, and investments in school accessibility.

**Finding 14:** Accessibility constitutes a key objective of the National Action Plan on Persons with Disabilities, accounting for 19% of the total planned cost. However, its implementation remains partial and fragmented. There is a lack of transparency and accountability on the part of the ministry responsible for transport regarding the progress and execution of related measures. The report of the Supreme State Audit concludes that the existing legal framework is not being effectively and fully implemented. At the local level, municipalities lack specific accessibility plans and structured monitoring mechanisms, while the current legislation is not fully aligned with EU standards. Regarding the accessibility of information, including the e-Albania platform, measures have been scheduled for 2026, and to date no concrete action has been undertaken.

## Summary of Recommendations:

**Overall Recommendation:** The Government of Albania should develop a National Long - Term Disability Strategy 2026-2030 (The Strategy) setting out concrete actions to improve the everyday lives of all disabled people. This should include immediate commitments to enhancing the quality of life of disabled individuals, ensuring their involvement in policy-making and service delivery, and outlining the specific actions each government department must take to ensure effective implementation of the Strategy.

01

The Strategy should articulate a long-term governmental vision to transform the lived experience of disabled people by addressing core pillars such as inequalities in education, employment, housing, transport, public services, and civic life, amongst others.

02

The Strategy should be shaped by concerns and insights of disabled individuals, making it far broader in scope than the National Disability Strategy 2021–2025. A meaningful, wide-ranging listening exercise, not limited to feedback from just one or two civil society organizations, should be undertaken to ensure the Strategy sets out concrete actions that genuinely improve all aspects of disabled people’s lives.

03

To avoid remaining aspirational only, the Strategy must include a fully developed long-term implementation plan with measurable outcomes, robust monitoring and evaluation mechanisms, genuine engagement with disabled people, adequate funding, and strong interdepartmental coordination.

04

The Strategy should also include an awareness-raising campaign that promotes the understanding that disability is everyone’s business and encourage positive changes in individual behavior. It should further outline how the government will work with wider society to drive long-term transformation change, including partnerships with businesses.

05

Establish a clear process for monitoring and reporting the National Disability Strategy’s achievements on an annual basis, using the outcomes, outputs, and indicators defined within the Strategy. Ensure that monitoring reports are published regularly to promote transparency and enable civil society organizations and other stakeholders to contribute to effective implementation by assessing the Strategy’s progress.



# Recommendations:

## Recommendation 1

Strengthen institutional oversight by ensuring that the National Council for Disabled People functions effectively. It should meet at least twice a year, include diverse and active representation from civil society and disabled people, and follow a clear annual work plan. Transparent mechanisms are needed to track, implement, and publicly report on recommendations, supported by published minutes and monitoring reports. Regular evaluations of the Council's impact would help strengthen evidence-based decision-making and improve policies for disabled people.

## Recommendation 2:

Enhance transparency and public accountability by establishing clear outcomes and indicators as well as regularly publishing monitoring and evaluation reports on the reform, including progress on the key outcomes, challenges, and complaints. Establish mechanisms and tools that enable civil society and other relevant stakeholders to participate meaningfully in oversight and continuous system improvement.



## Recommendation 3:

- Strengthen the analytical foundations of the biopsychosocial model by conducting a comprehensive national analysis of Albania's social, economic, and territorial context and capacities. Integrate locally relevant indicators such as poverty levels, access to services, lifestyle environmental barriers, and family support into the assessment process to ensure a holistic understanding of the approach
- A comprehensive mapping of capacities including infrastructure and resources should be carried out across the country. A Multidisciplinary Commission should determine appropriate alternatives, such as alternate in-kind services or cash compensation, in cases where public institutions or healthcare providers lack the capacity to deliver the required services.

## Recommendation 4.1:

Strengthen interinstitutional cooperation by formalizing coordination and the contributions of all actors involved in the assessment and support of disabled people, including general practitioners (family doctors), specialist clinics, primary healthcare providers and other medical services delivering in-kind support, as well as social administrators who closely monitor the progress of disabled individuals.

## **Recommendation 4.2:**

Introduce an integrated automated system that allows all relevant parties, medical professionals, social administrators, specialist services, and multi-disciplinary assessment commissions to input information directly into a unified platform.

## **Recommendation 5.1:**

Allocate additional staff, tools, and dedicated transport or mobile assessment units to facilitate home visits by social administrators at least on a quarterly basis, in accordance with Council of Ministers Decision No. 722.

## **Recommendation 5.2:**

Develop and implement a structured, continuous professional development programme for social administrators, including training on the benefits and challenges of the biopsychosocial approach. Training should include practical case-based learning, and practical guidance on ethical, respectful, and empathetic communication with disabled individuals and their families.



## **Recommendation 5.3:**

Produce and disseminate a comprehensive manual or a set of standard operating procedures for social administrators, clearly outlining all stages of the assessment process, expectations for home visits, and detailed reporting requirements for disabled individuals. This manual should provide step by step instructions, practical examples, ethical communication standards, and guidance on preparing for home visits, engaging respectfully with disabled individuals and their families, and documenting observations in a structured and objective manner.

Develop standardised forms and templates for recording feedback from home visits of disabled individuals, to promote uniformity and compliance with legal requirements.

## **Recommendation 5.4:**

Create an electronic system for tracking assessment data, reducing the risk of incomplete or inconsistent documentation and ensuring full integration with the National Electronic Register. This system should function as a central, secure platform where social administrators can input information in real time. At an advanced stage, integrated analytics could help identify trends, flag complex cases for further multidisciplinary review, and support long-term planning at policy level.

## **Recommendation 6:**

Implement and make effective the Social Employment Fund to support the labour-market inclusion of disabled individuals by financing employment related measures such as vocational training, workplace adaptations, and skills development. The Fund could support initiatives such as job-coaching, supported employment schemes, entrepreneurship grants for disabled individuals, and incentives for employers who demonstrate inclusive hiring practices.

## Recommendation 7:

Promote a clear shift from a diagnosis driven mindset to a holistic, biopsychosocial understanding of disability by investing in awareness, training, and consistent practice across all levels of the assessment system. This should include targeted communication campaigns for professionals, disabled individuals, watchdogs to explain that disability classification is no longer determined solely by medical diagnoses, but by how health conditions interact with psychological factors, behaviour, and social barriers. Training programmes for assessors, medical staff, social administrators, and other relevant actors part of the process should emphasise functional assessment, lived experience, and contextual factors, helping stakeholders and practitioners move away from a narrow clinical lens. Standardised tools, case examples, and decision-making guidelines can reinforce this shift in daily practice.

## Recommendation 8.1:

Collect and publish accurate data about disability. In more detail, statistics should include: Number of disabled people in employment, Disability employment rate, Disability employment gap for the working age 16-65, Number of disabled people against the working age population, Disability employment gap changes with age, Disabled female employment rate against disabled male employment rate.



## Recommendation 8.2:

Prepare an action plan in the new nationality strategy on how to make the world of work more inclusive and accessible by setting out proposal for disabled people not only to start but also stay at work; encourage employers to recruit, retain and progress their disabled employees and to create inclusive workplaces and provide reasonable adjustments; strengthen rights in the workplace by encouraging flexible working and improving access to advice on employment rights for disabled people and employers, explore with disabled people what extra help would be most useful for those wishing to start a business, champion opportunities for disabled people in the Civil Service and ensure the support to thrive at work.

## Recommendation 9.1:

Introduce the necessary amendments to Council of Ministers Decision no. 722, dated 11.11.2019, “On Determining the Amount, Criteria, Procedures and Documentation for the Assessment and Granting of Disability Status and Personal Assistant, and the Responsible Structures and Their Duties,” to allow the applicants-disabled individuals to be interviewed in their place of residence when their health, mobility limitations, or personal circumstances make it difficult or impossible to attend assessments in person. This amendment should clearly define eligibility criteria for home-based interviews, outline the responsibilities of the Multidisciplinary Commissions, and establish procedural safeguards to ensure that home assessments are conducted with the same rigour, dignity as those carried out on Social Service premises.

## Recommendation 9.2:

Allocate the logistical, human, and financial resources required for Multidisciplinary Commissions to conduct and properly document interviews outside Social Service settings. This includes providing transportation, portable assessment tools, and adequate staffing to ensure that home visits do not delay the overall assessment process.

## **Recommendation 10:**

Make amendments to the Notification of Decision Form issued by Multidisciplinary Commissions to ensure that it clearly sets out the applicant's right to appeal, the legal basis for the decision, and the competent authority or court responsible for reviewing the appeal. It should specify the timeframe for submitting an appeal, the administrative body that must first review the complaint, and the judicial authority that has jurisdiction if the applicant seeks further redress.

## **Recommendation 11.1:**

A progressive and sustainable increase in state budget allocations for persons with disabilities is recommended, with the aim of improving their quality of life and ensuring the full exercise of their fundamental rights. Increased funding should not be limited to direct cash benefits but should also prioritize the expansion and strengthening of community-based social services, support for independent living, and the provision of integrated social and healthcare services. In this regard, budget planning should be grounded in a comprehensive assessment of actual needs, detailed cost analyses of services, and continuous monitoring of the effectiveness and impact of public expenditures.

## **Recommendation 11.2:**

Clear and binding standards should be established for the collection, analysis, and publication of disaggregated data (by type of disability, geographic location, age, and gender) across all relevant ministries and responsible institutions. Monitoring efforts should prioritize performance indicators and measurable outcomes achieved, rather than focusing solely on levels of financial expenditure.



## **Recommendation 11.3:**

Coordination mechanisms between ministries and local government units should be strengthened in order to ensure a holistic and integrated approach to service delivery and the implementation of policies for persons with disabilities.

## **Recommendation 12:**

The establishment and effective functioning of social funds in every municipality should be ensured through clear implementation guidelines and strengthened administrative capacities. An analysis of the factors undermining the effectiveness of employment policies for persons with disabilities should be undertaken, followed by the development of more targeted programs supported by adequate funding and strong monitoring and evaluation mechanisms.

## **Recommendation 13:**

Data inconsistencies concerning students with disabilities should be addressed and a consistent, unified, and transparent system for their data collection and monitoring should be ensured. Investment in school infrastructure should be strengthened to guarantee accessibility, alongside the allocation of dedicated resources for the professional development of assistant teachers and other support specialists.

## **Recommendation 14:**

Specific action plans, accompanied by clear timelines, should be developed and implemented to ensure physical accessibility of public infrastructure and road transport, in full alignment with EU standards. The implementation of digital accessibility measures for the e-Albania platform and official websites of public institutions should be accelerated, ensuring that these measures are fully operational well in advance of 2026.

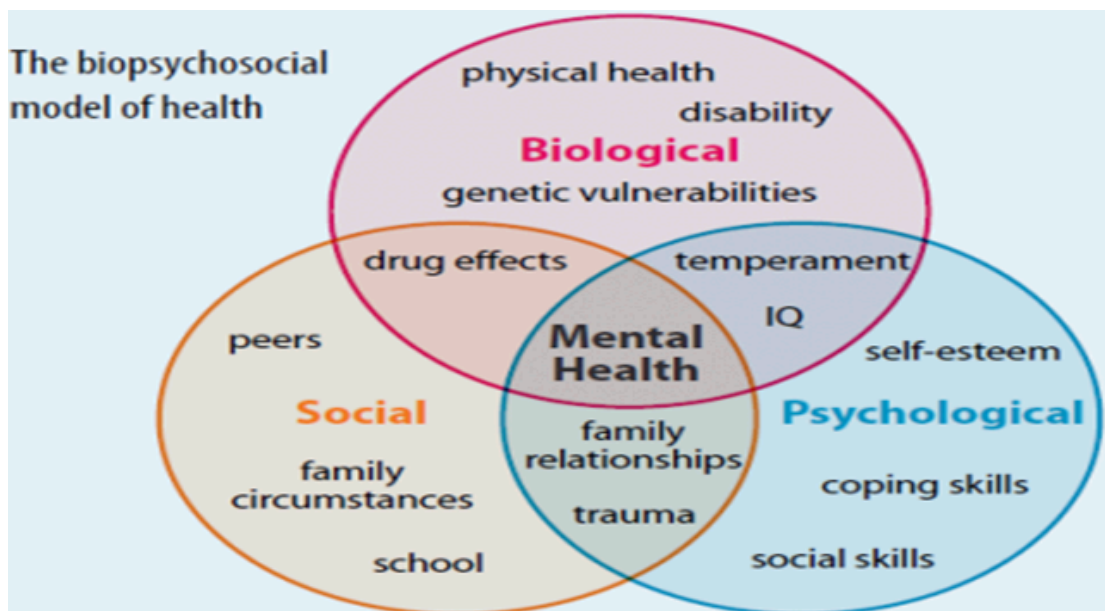
# INTRODUCTION



## BACKGROUND

The biopsychosocial model is a holistic framework for understanding and assessing disability that integrates biological, psychological, and social dimensions of functioning. This approach conceptualizes disability as the result of interactions between an individual's health condition and contextual factors, including environmental barriers, social attitudes, and personal factors<sup>2</sup>. While this model provides a person-centred framework, and facilitates intersectoral policy coordination across health, social protection, education and employment system, it also presents challenges. Its multidimensional nature makes assessment processes complex, resource-intensive, and difficult to standardize. Subjectivity in evaluating psychosocial and environmental factors affects consistency and comparability of assessments. Moreover, implementation in low-capacity settings can be constrained by limited data systems, professional expertise, and inter-institutional coordination mechanisms.

### The biopsychosocial model of health

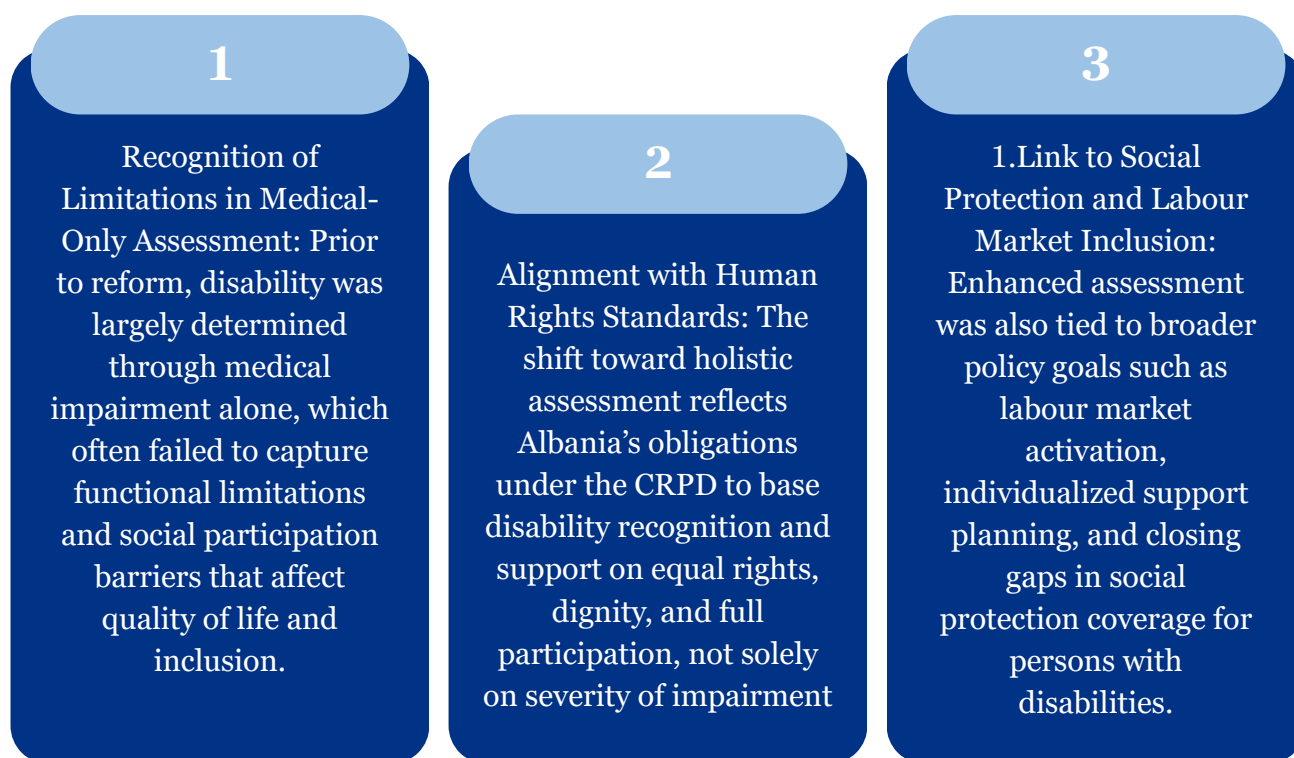


Source: *Cumbria.nhs.uk*

<sup>2</sup>World Health Organization (2001) – International Classification of Functioning, Disability and Health (ICF)



The Policy Document “Disability Assessment Reform in the Social Protection System and Action Plan 2019–2024” preceded the introduction of the biopsychosocial reform in Albania. The rationale for reforming disability assessment and support schemes in Albania was grounded in:



According to the Government, the reform represented a structural shift toward a more equitable, coordinated, and sustainable disability assessment system aligned with inclusive social protection principles. The biopsychosocial model was formally introduced through Law no. 57/2019 “On Social Assistance and Disability Assessment in Albania” (as amended) defining disability as a function of interrelated biological, psychological, and social factors that affect daily functioning and societal participation in alignment with international frameworks such as World Health Organization’s International Classification of Functioning, Disability and Health and the United Nation Convention on the Rights of Persons with Disabilities reflecting a holistic, rights-based approach.

The model was implemented in Albania through local self-government units, with key roles for the Regional Directorates of the State Social Service, conducting evaluations and issuing decisions, municipal mayors, managing financial procedures, and the Council of Ministers setting criteria, procedures, and responsibilities. Data are managed via the National Electronic Registry to ensure standardization and coordination.



According to media coverage, the reform has caused dissatisfaction among disabled people, with hundreds reporting their exclusion from the support program or changes in their categorization<sup>3</sup>. There were reports of:

- 1.Reclassification of cases, particularly among persons with partial or moderate disabilities;
- 2.Some individuals previously eligible under the medical model were declared ineligible or assigned lower support levels under functional criteria;
- 3.Delays in reassessment created temporary suspension of benefits for some applicants.

Following the implementation of the biopsychosocial model, a reduction in the reported prevalence of disability was observed. However, we could not find evidence of a massive nationwide removal in 2019 from the disability status, although the perception created. The reform was not officially designed as a cost-cutting or mass-removal reform, but rather as a structural shift from a medical to a functionality-based model.

National administrative figures show that according to official social protection data, in 2018–2019 roughly 140,000–168,000 persons were recognised under official disability schemes, corresponding to about 4.8 %–5.9 % of the population, and receiving disability related benefits or services through various programs<sup>4</sup>. In late 2019, official statistics from the Albanian State Social Service identified approximately 147,199 persons as officially recognized with a disability, about 5.2% of the national population. Of these 75,016 persons were categorized as “work invalids” benefiting from both social insurance and social protection payments and 72,183 persons were receiving disability related allowances and benefits under the social protection system.

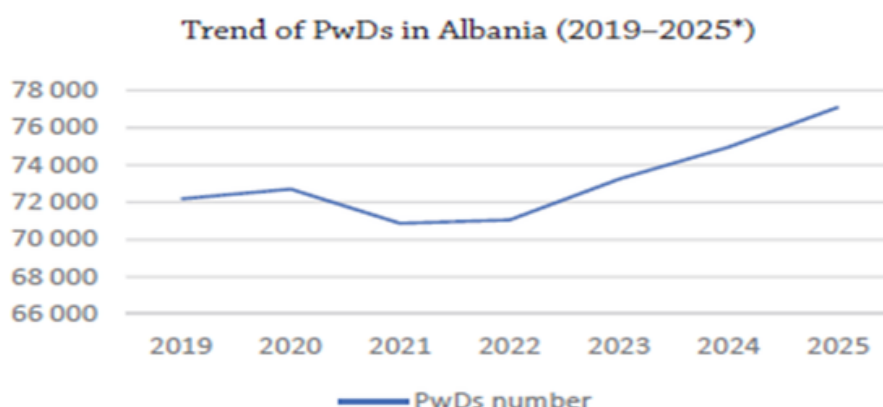
Since the adoption of the biopsychosocial model in 2019, there has been a substantial increase in the number of Persons with Disabilities assessed, continuing through to 2025. The trend graph illustrates the changes in the number of Persons with Disabilities assessed between 2019 and 2025. As shown, the highest recorded increase occurred after the nationwide rollout of the biopsychosocial model in 2022, reflecting expanded assessment coverage and rising demand for disability related services<sup>5</sup>.

<sup>3</sup><https://www.syri.net/kronike/583456/investigimi-skema-e-re-e-aftesise-se-kufizuar-demon-qindra-te-semure/>  
<https://shendeti.com.al/reforma-e-aftesise-se-kufizuar-sfidat-e-perfituesve/>

<sup>4</sup>Unicef (2021), *Analiza e Situates se Femijve dhe adoleshenteve ne Shqiperi*

<sup>5</sup>Musa, Rama, Fino (2026), *transforming disability assessment in Albania: progress and challenges of the biopsychosocial model*

[https://www.researchgate.net/publication/400123635\\_Transforming\\_disability\\_assessment\\_in\\_Albania\\_progress\\_and\\_challenges\\_of\\_the\\_biopsychosocial\\_model](https://www.researchgate.net/publication/400123635_Transforming_disability_assessment_in_Albania_progress_and_challenges_of_the_biopsychosocial_model)



The 2019 biopsychosocial reform in Albania represented a structural modernization of disability assessment aligned with international standards; however, transitional implementation challenges generated concern among beneficiaries, particularly regarding potential loss or reduction of benefits. However, without parallel expansion of community and psychosocial support services, some beneficiaries perceived the reform as restrictive rather than empowering<sup>6</sup>.

Despite the reform being a major policy shift, there is a noticeable scarcity of publicly accessible monitoring reports and peer-reviewed pilot study publications evaluating how the reform has performed in practice. Civil society sources and policy briefs have noted no accessible reform monitoring reports to track achievements or challenges, leaving stakeholders and affected communities without clear evidence of progress. This has been also underlined by previous reports on the matter<sup>7</sup>.

[6] Shoqata e Diabetit ne Shqiperi (2021), Raport monitorimi i shoqërisë civile për sistemin e ri të vlerësimit për aftësinë e kufizuar <https://www.diabeti-albania.org/raport-monitorimi-i-shoqerise-civile-per-sistemin-e-ri-te-vleresimit-per-afesine-e-kufizuar/>

[7] IDM (2022), Improving the situation of personal assistants and the progress of the reform for the bio-psycho-social assessment of persons with disabilities [https://idmalbania.org/wp-content/uploads/dlm\\_uploads/2022/09/Mbi-situaten-e-ndihmesit-personal-dhe-vleresimi-psiko-social.pdf](https://idmalbania.org/wp-content/uploads/dlm_uploads/2022/09/Mbi-situaten-e-ndihmesit-personal-dhe-vleresimi-psiko-social.pdf)

# Objectives and Scope of the Work



The objective of this assessment is to provide a comprehensive analysis of the new disability's scheme based on the biopsychosocial model implemented in Albania, and its implications for disabled people and society in general. The conclusions of this analysis will form the basis for an advocacy campaign focused on reviewing and enhancing improving existing programs and policies, improving the allocation of resources to support the needs of disabled people, and promoting better use of public funds.

This evaluation systematically and objectively a) examines the assessment criteria of the new disability scheme, b) the legislative support mechanisms, c) the benefits and funding allocated to persons with disabilities, as well as provides actionable recommendations to enhance the scheme's overall performance.

The primary audience for this report includes individuals affected by the scheme, civil society organisations (CSOs) operating in the disability and human rights sectors, central and local government bodies, institutions involved in implementing the biopsychosocial model, as well as families of disabled individuals, schools, and educational centres. The assessment is conducted from October 2025 to March 2026.



# 4. Methodology



## Overview:

The collection of this assessment data is carried out through a variety of techniques that range from direct observation to focus/reference group, and semi-structured interviews. The analysis will build on triangulating information obtained from various stakeholders' views as well as with secondary data and documentation reviewed by the assessment experts.

The assessment is based on three key activities:

1. Stakeholder involvement.

2. Desk review of policies and programs, frameworks on disabilities schemes.

3. Data Collection.

**Stakeholder Involvement:** Meetings were held with key stakeholders, in particular with TFL team and other key stakeholders, such as main NGOs working in disability and human rights sector. The objective of these meetings was to ensure an opportunity for key stakeholders to participate in the design, data collection, analysis and development of recommendations.

**Desk Review:** Initial research including review of the existing policies and programs focusing on the most relevant documents and frameworks, legislative framework, budget and other financial data was conducted by the assessment team. Special attention has been given to the coordination of efforts by all team members and integrated review to improve efficiency and avoid duplication of work. The legal and regulatory research has assessed the legislation to the extent it concerns to the “Assessment of the New Disability Scheme’s Effects” and the objectives of the work.



**Data collection/ Stakeholder Interviews with semi - structured questionnaire:** These interviews are conducted with a consistent set of precautions for informed consent and confidentiality representatives from different central and local governments, and independent institutions such as ombudsman, Commissioner for the right to Information and Protection of Personal Data, Ministry of Health and Social services, among others. Additional information and data were provided by the responsible institutions<sup>8</sup> in response to our requests for information.

Please refer to **Table 1** for more details on the range of stakeholders interviewed for the purpose of this assessment.

**Table 1 - Number of semi structured interviews**

Type of stakeholder	Number of Interviewees
The National Council for Disabled People	1
The employees in charge of disability matters in Municipality of Tirana	1
The employees in charge of disability matters in Municipality of Kamez	1
National Agency of Employment and Capabilities	0
Ombudsman office	2

[8] Ministry of Health and Social Protection; Ministry of Economy and Innovation; Ministry of Justice; National Agency for Information Society



<b>Type of stakeholder</b>	<b>Number of Interviewees</b>
Ministry of Health and Social Welfare	1
The Commissioner from Protection from Discrimination	1
State Inspectorate of Labor and Social Services	1
State Social Service	1
Commissioner for the right to Information and Protection of Personal Data	1
Center for Free Legal Assistance	1
MEDPAK	1
Foundation "Together"	1
<b>Total</b>	<b>13</b>



**Survey:** Survey data and conclusions drawn from the MEDPAK led survey conducted in September 2025 “Transparency and accountability in biopsychosocial assessment: from findings to action” are utilised by the assessment team for this evaluation. If necessary, additional data will be collected through a complementary survey involving beneficiaries.

**Limitations and risks:** Ekzistojnë There are several important limitations in the assessment methods. First, due to limited time and resources, it will not be possible to collect representative samples. The assessment will therefore be inherently qualitative, based on small and non-random sample sizes.

Nevertheless, the survey results produced by MEDPAK are used as the primary data source to gather feedback from disabled people on the application of the biopsychosocial model and the payment scheme, as well as input from central and local government employees responsible for disability related matters. This assessment acknowledges the risk for subjectivity and bias arising from the use of a survey conducted by another organization that is not specialized in quantitative analysis.

This assessment does not include an analysis of the employment and professional development of disabled individuals, one of the core pillars and intended benefits of the new biopsychosocial model, because the National Agency of Employment and Capability (AKPA) was not available to provide the necessary information.

Unfortunately, due to the absence of published data, it was not possible to examine the reported decline in employment under the new scheme, which fell from 111 in 2022 to 103 in 2023 and then to 46 in 2024, according to the State Inspectorate of Labor and Social Affairs.<sup>9</sup>

The legal assessment is subject to certain limitations. It is based on the availability and quality of existing data, legislation, and policy documents concerning the new disability assessment scheme in Albania. The analysis does not account for unpublished, informal, or ongoing reforms that may affect the implementation or interpretation of the relevant legal framework. Furthermore, the evaluation of the effectiveness of policies and programs reflects the situation as of the time of data collection and may not fully capture subsequent administrative or judicial developments. Accordingly, findings should be interpreted within these contextual and temporal constraints.

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[9] [https://inspektoriatipunes.gov.al/wp-content/uploads/2025/03/ISHPSHSH\\_Raporti-Vjetor\\_2024.pdf](https://inspektoriatipunes.gov.al/wp-content/uploads/2025/03/ISHPSHSH_Raporti-Vjetor_2024.pdf)



# Part 1

## 1.ECONOMIC AND LEGAL KEY FINDINGS & RECOMMENDATIONS



**Finding 1:** National Council for Disabled individuals (The Council) is characterized by irregular functioning, limited influence on decision-making, and insufficiently inclusive representation. Stakeholders’ recommendations often remain procedural formalities and are not followed by actions or implementation mechanisms from the responsible institutions, particularly in relation to biopsychosocial assessment.

The National Council on Disability is an advisory body to the Government that reviews, coordinates, and facilitates disability related actions across sectors and at different levels of governance. It is chaired by the Minister of Health and Social Protection and is composed of 17 members, including 10 representatives from the Government Cabinet and 7 from organisations of disabled people.

Insights from stakeholders from civil society, along with our review of secondary data, indicate the Council has not effectively contributed to improving the rights of disabled individuals, and ensuring the voice of civil society organizations and individuals are heard and reflected in decision-making processes. The Council has not operated regularly as required by law. Only a limited number of meetings have been held, and “discussions have largely focused on the government’s propagandistic and political agenda. Members from civil society organisations representing disabled people were not given the opportunity to voice their concerns or to discuss potential solutions and action plans”- stated a stakeholder from the civil society organisations. In addition, transparency has been limited due to the absence of regularly published agenda and minutes of the meetings.

The performance Audit Report “Accessibility for Disabled People” 2025 of the Supreme Sate Audit also discusses this finding<sup>10</sup>. The report states that: “The National Council on Disability has not functioned regularly or effectively as an inter-institutional advisory and evaluative body, contrary to the requirements set out in DCM No. 48, dated 21.01.2015. During the period 2021–2024, only three meetings were held, including one online meeting without supporting documentation. Institutional representation was not at the ministerial level, as prescribed by the legal framework, and cases of delegation were not documented in accordance with the requirements of the Code of Administrative Procedures. Furthermore, the topics addressed in the meetings were general and did not include key issues such as accessibility in infrastructure and transport. These shortcomings have limited the council’s guiding and coordinating role in the field of policies for disabled people”.

[10]<https://www.klsh.org.al/wp-content/uploads/2025/11/Raport-Aksesueshmeria-PAK-web.pdf?utm>



**Recommendation 1:** Strengthen institutional oversight by ensuring that the National Council for Disabled People functions effectively. It should meet at least twice a year, include diverse and active representation from civil society and disabled people, and follow a clear annual work plan. Transparent mechanisms are needed to track, implement, and publicly report on recommendations, supported by published minutes and monitoring reports. Regular evaluations of the Council's impact would help strengthen evidence-based decision-making and improve policies for disabled people.

## STRATEGIC

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**Finding 2:** There is a lack of transparency regarding the benefits and challenges of the pilot project implemented in three counties to introduce the new bio-psycho-social scheme, as well as how these challenges were addressed when the scheme was scaled up to a national level. There is also a lack of clarity and no available evidence demonstrating that an assessment of capacities, human resources, accessibility, including homes and other care settings for disabled people, and overall needs was conducted prior to transitioning from the old medical model to the new bio-psycho-social scheme.

The reform seeks to apply the bio-psycho-social approach, which views disability not solely as a medical condition but as the result of interactions among biological, psychological, and social factors. According to findings from civil society organizations, as well as practices and complaints examined by the Ombudsman and the Commissioner for Protection from Discrimination, no comprehensive analysis of Albania's social, economic, institutional, and structural realities appears to have been carried out before the reform's implementation. We requested access to the official findings of the pilot project conducted in Tirana, Durrës, and Elbasan, but were unable to locate any official report. Civil society organizations have expressed concerns about the lack of clarity with regards to the progress of the reform. No public monitoring reports outlining achievements and challenges in the assessment process have been published. This absence of transparency not only clouds the evaluation of capacities at both local and central government levels to deliver services to persons with disabilities but also limits civic engagement and reduces opportunities for citizens to contribute to improving the system.

**Recommendation 2:** Enhance transparency and public accountability by establishing clear outcomes and indicators as well as regularly publishing monitoring and evaluation reports on the reform, including progress on the key outcomes, challenges, and complaints. Establish mechanisms and tools that enable civil society and other relevant stakeholders to participate meaningfully in oversight and continuous system improvement.

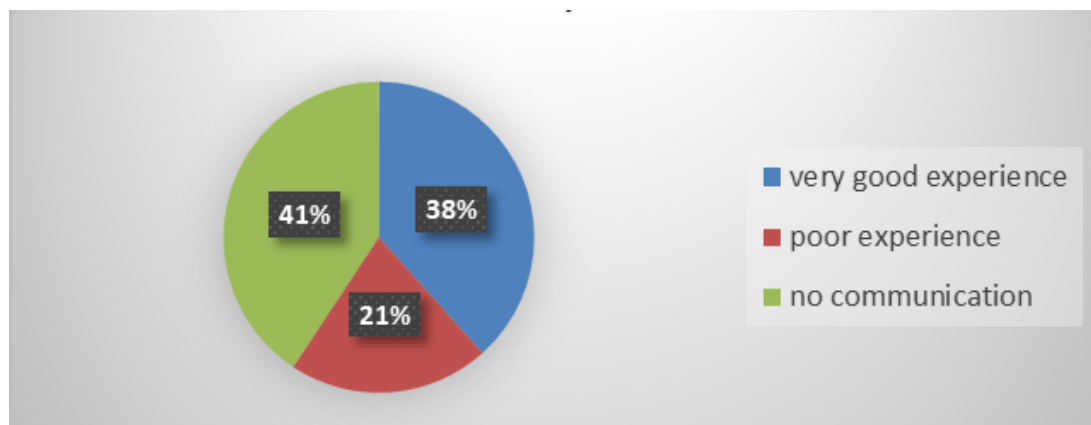
**Finding 3:** Insights from most stakeholders indicate that the capacities and services offered to disabled individuals are often lower than those recommended by the Multidisciplinary Commission. There is a lack of alignment and cohesion between central and local institutions, particularly in terms of human resources skills and time, and infrastructure which does not correspond to the needs of disabled individuals. This raises concerns about the practical effectiveness of implementing the bio-psycho-social approach. A major concern raised by stakeholders is the significant lack of mental health centers, which remain largely absent in many cities and towns across Albania.

Meetings with stakeholders confirmed that recommendations issued by the Multidisciplinary Commissions are not supported by the availability of corresponding services at the municipal level such as psychotherapy, physiotherapy, and other essential interventions even in municipalities like Tirana, which has the largest number of disabled individuals. “Many services recommended by the Multidisciplinary Commissions are not provided by the Community Centers in the respective Administrative Units, - stated a representative of municipality of Tirana. Members of these Commissions acknowledged this during interviews but explained that their recommendations are based on the officially approved Manuals for the Biopsychosocial Assessment of Disability in Adults and Children. They emphasized “that they cannot refrain from issuing appropriate recommendations. It is the responsibility of municipalities and local social services to allocate funds and ensure the provision of these services”.

The MEDPAK survey results also indicate that 80% of disabled individuals and their families feel that there are no appropriate settings or adequate infrastructure in place when the Commission assesses their needs. In addition, respondents reported that service providers do not use specialised language or adapted tools when conducting the biopsychosocial assessment. Also, according to the findings with regards to the communication with health professionals that offer services to disabled individuals, 38% reported a good experience, 21% reported poor services, and 42% stated that there was no communication at all with the institutions responsible for providing services to disabled people. This lack of communication contributes to weak coordination and undermines efforts to ensure inclusive service provision.



**Graphic 1:** *How do you feel about communication with health professionals?*



This situation highlights a lack of effective coordination between central and local institutions, social services, healthcare providers, and other relevant bodies despite the framework established by the National Strategy for Social Protection 2024–2030 and its Action Plan, which aim to ensure that services for disabled individuals are accessible, affordable, and effectively implemented in practice.

**Recommendation 3.1:** Strengthen the analytical foundations of the biopsychosocial model by conducting a comprehensive national analysis of Albania’s social, economic, and territorial context and capacities. Integrate locally relevant indicators such as poverty levels, access to services, lifestyle environmental barriers, and family support into the assessment process to ensure a holistic understanding of the approach.

**Recommendation 3.2:** A comprehensive mapping of capacities including infrastructure and resources should be carried out across the country. A Multidisciplinary Commission should determine appropriate alternatives, such as alternate in-kind services or cash compensation, in cases where public institutions or healthcare providers lack the capacity to deliver the required services.



**Finding 4:** There is a siloed and fragmented approach within the Multidisciplinary Commission when assessing the disability-related needs of applicants. Inputs from general practitioners, specialist doctors, medical centres providing in-kind services, and employment agencies are often missing, resulting in decisions that can be inaccurate and inconsistent even for applicants with similar disability conditions.

The lack of automated systems and tools makes it even more difficult for the relevant parties to provide and store information in a central system. This limits the Multidisciplinary Commission's ability to base its decisions on an applicant's full history and to use the collected data to produce accurate reports on applicants' progress, as well as to identify national needs related to capacities, services, and infrastructure.

The current approach requires disabled individuals (applicants) to attend an interview with the Multidisciplinary Commission according to the timeframe and frequency determined by the Commission. A detailed questionnaire is used to assess the applicant's capacities and abilities to carry out daily activities. The responses are scored, and the final decision regarding the category of disability is based on these scores. The decision includes not only cash benefits, but also in-kind support such as speech therapy, physiotherapy, training, and professional development activities intended to help the applicant return to work.

Insights from stakeholder interviews indicate that the approach followed by the Multidisciplinary Commission is siloed and fragmented. There is no systematic feedback provided to the Commission from general practitioners, specialist doctors, public or private medical centres offering in-kind services recommended by the Commission, or from employment agencies and employers regarding potential job opportunities or employment performance of disabled individuals. As a result, the assessment of applicants relies almost entirely on a one-hour interview conducted by two Multidisciplinary Commission members. Stakeholders expressed concern that such an approach does not lead to accurate assessments and may result in inappropriate recommendations, ultimately limiting the ability of applicants to live with fewer constraints. Moreover, it is unclear whether the Multidisciplinary Commission uses an automated system that allows all relevant parties to input information throughout the assessment process. It is also uncertain whether such a system, if it exists adequately considers data protection requirements under law 124/2024 "On Personal Data Protection" and its by-laws, including the right of disabled individuals to have their information anonymized when reports are issued or prepared for statistical purposes. The existence of such tool would reduce fragmentation, minimise the risk of missing or inconsistent documentation, and support more objective, evidence-based decision-making.



**Recommendation 4.1:** Strengthen interinstitutional cooperation by formalizing coordination and the contributions of all actors involved in the assessment and support of disabled people, including general practitioners (family doctors), specialist clinics, primary healthcare providers and other medical services delivering in-kind support, as well as social administrators who closely monitor the progress of disabled individuals.

**Recommendation 4.2:** Introduce an integrated automated system that allows all relevant parties, medical professionals, social administrators, specialist services, and multi-disciplinary assessment commissions to input information directly into a unified platform. Such a system would ensure that every assessment is based on a complete, accurate, and up-to-date picture of the individual's needs, history, and progress.

## OPERATIONAL

**Finding 5: Social** Administrators play a vital role in implementing biopsychosocial approach and supporting disabled individuals in Albania. However, their effectiveness is limited by resource shortages, insufficient training, and the lack of automation and standardized documentation. These gaps make their work inefficient, forcing them to focus more on bureaucratic tasks rather than on supporting disabled individuals by informing them of their rights and the benefits to which they are entitled.

Social administrators play a central role in the biopsychosocial assessment process for disabled individuals. Their role is defined in several articles (4,15,16,22 and specifically 23) of the law no. 57/2019 “On Social Assistance in the Republic of Albania” (as amended) and Section III of the Council of Ministers Decision no.722. Their core job concerns: (i) Assessment Participation: Collaborating with medical professionals to evaluate applicants’ functional capacities, social needs, and environmental barriers. (ii) Case Management: Supporting applicants through the assessment process, collecting necessary documentation, and coordinating access to social services; (iii) Policy Implementation: Assisting in implementing the National Strategy and related action plans for persons with disabilities at the local level; (iv) Referral and Support: Guiding individuals to appropriate social services, rehabilitation programs, and community support, in coordination with other institutions.



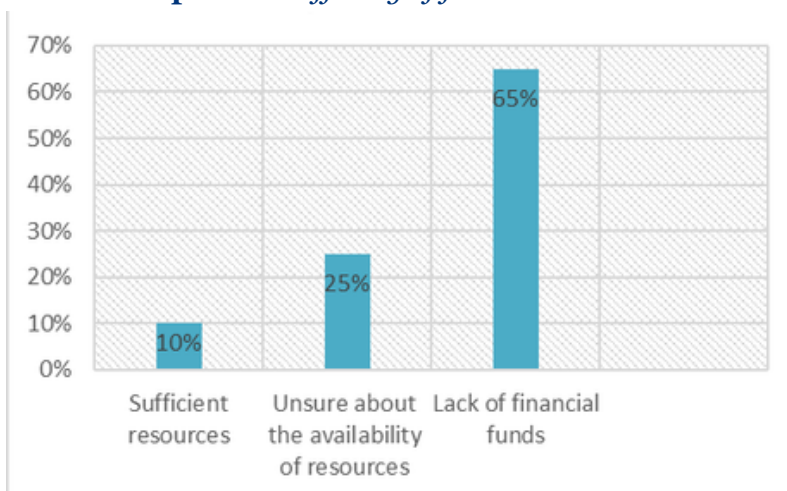
Interviews with stakeholders highlight several constraints and challenges affecting the effective role of social administrators in the bio-psycho-social assessment, including the following:

**Resource Constraints:** Many social administrators, particularly those working in rural and peripheral areas, face shortages of qualified staff, essential tools, and adequate infrastructure. These limitations significantly reduce their capacity to conduct accurate and comprehensive assessments. In practice, this means that in several cases they are unable to carry out home visits at least once every three months, as required by Section III, point 5 of Council of Ministers Decision No. 722. Also, according to the Social Protection Sector of the Municipality of Tirana, “disabilities are sometimes underreported due to stigma within families, especially in cases involving children on the autism spectrum”.

One social administrator explained: “There are 430 disabled individuals in my area. By law, I am required to visit each of them every three months, mainly to verify residency but also to assess their progress. To meet the legal requirement, I would need to visit seven families every day, which would leave no time to be in the office. This is simply not feasible given our limited capacity. In addition, I have other administrative duties, such as providing monthly updates to social services on the progress of disabled individuals, attending training, staying informed about legislative changes, and completing other legally required tasks. It is not practical.”

The MEDPAK survey results also indicate that the majority of professionals working in the disability space believe that the biopsychosocial assessment is not adequately supported by financial and human resources. Specifically, 65% of respondents reported insufficient funding, while 25% expressed uncertainty about the availability of resources.

**Graphic 2:** *Sufficiency of financial resources*





**Insufficient Training:** The lack of continuous professional development and advanced training opportunities limits the ability of social administrators to carry out complex bio-psycho-social evaluations effectively and consistently. In the Municipality of Tirana, there is no structured training scheme for social administrators. Moreover, they do not have a guiding document or manual specifically addressing the assessment and support of disabled individuals emphasising the need for continuous refresher training in such a space. This view is supported by the MEDPAK survey results, which indicate that only a limited number of respondents reported having received any training.

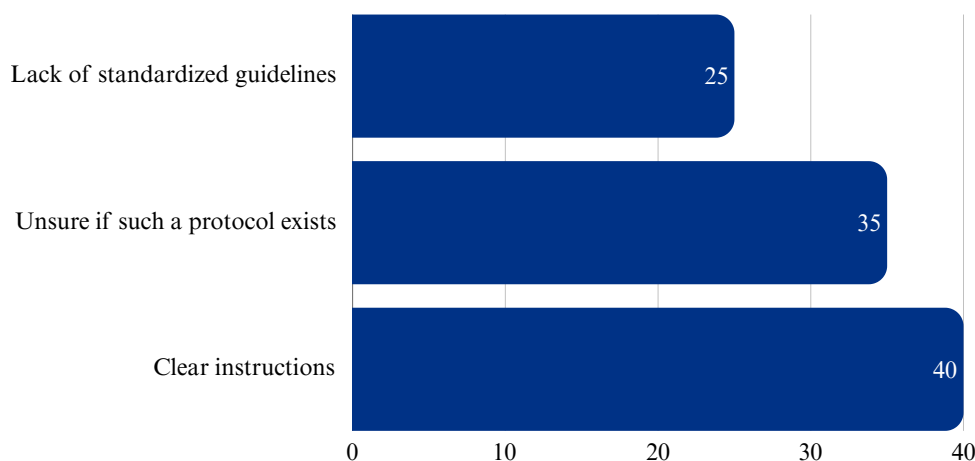
Another social administrator confirmed that they receive training on an annual basis, the latest have been financed by UNDP. However, when we requested information about the training modules and a list of social administrators trained in each town, county, or region, no such information was provided by the Ministry of Health. Although induction training may not be necessary for experienced staff, refresher training should be mandatory to ensure that those working in such a complex field remain up to date with legislative changes and are familiar with international best practices for effectively implementing the biopsychosocial approach.

**Lack of Automation and Documentation Standardisation:** Existing assessment procedures requires extensive documentation, which can be difficult to obtain, incomplete, or inconsistently standardized particularly in areas with limited resources. Assessments conducted during home visits, are recorded manually as there is not a Standardized Form that allows Social Administrators to record their feedback and it remains unclear how this manually collected information is then transferred into the National Electronic Register. This raises concerns about the efficiency and reliability of the overall process. Moreover, there is no evidence to confirm that results and follow up of earlier recommendations for speech therapy and physiotherapy issued by the Commissions are properly documented or monitored.

Also, the MEDPAK survey results confirm that there is room for improvement regarding the standardisation of manuals and guidance, as well as the need for clearer communication and continuous training on the policies and procedures of the biopsychosocial assessment. According to the survey, 25% of respondents reported a lack of standardised guidance and inconsistency in the use of instructions, while 35% were unsure whether such a protocol even exists.



**Graphic 3:** Standardization of manuals and guidance on biopsychosocial assessment



**Recommendation 5.1:** Allocate additional staff, tools, and dedicated transport or mobile assessment units to facilitate home visits by social administrators at least on a quarterly basis, in accordance with Council of Ministers Decision No. 722.

**Recommendation 5.2:** Develop and implement a structured, continuous professional development programme for social administrators, including training on the benefits and challenges of the biopsychosocial approach. Training should include practical case-based learning, and practical guidance on ethical, respectful, and empathetic communication with disabled individuals and their families.

**Recommendation 5.3:** Produce and disseminate a comprehensive manual or a set of standard operating procedures for social administrators, clearly outlining all stages of the assessment process, expectations for home visits, and detailed reporting requirements for disabled individuals. This manual should provide step by step instructions, practical examples, ethical communication standards, and guidance on preparing for home visits, engaging respectfully with disabled individuals and their families, and documenting observations in a structured and objective manner.

Develop standardised forms and templates for recording feedback from home visits of disabled individuals, to promote uniformity and compliance with legal requirements. Standardisation would also support quality assurance and improve the reliability of data used for decision-making and policy development.



**Recommendation 5.4:** Create an electronic system for tracking assessment data, reducing the risk of incomplete or inconsistent documentation and ensuring full integration with the National Electronic Register. This system should function as a central, secure platform where social administrators can input information in real time. By consolidating data into a single digital record, the system would minimise human error by providing mandatory fields, and automated alerts when information is missing or outdated. At an advanced stage, integrated analytics could help identify trends, flag complex cases for further multidisciplinary review, and support long-term planning at policy level. Ultimately, such a system would enhance transparency, strengthen accountability, and ensure that disabled individuals receive timely and well-informed support.

**Finding 6:** Although included in the legal framework since 2023, the Social Employment Fund intended to promote the employment and inclusion of disabled individuals in Albania has not yet been activated or implemented in practice.

The Social Employment Fund is a policy mechanism established under article 21 of the law no. 15/2019 “On Employment Promotion” (as amended). It is intended to support the labour-market inclusion of disabled individuals<sup>11</sup> by funding employment-related measures such as training, workplace adaptation, and skills building, “The Fund is created from financing and grants; funds obtained from agreements between the Republic of Albania, the Council of Ministers, and various donors; the state budget and legitimate sources and most importantly by contributions paid into the Fund’s account by the employers. According to the article 20 of the law, employers should employ one person with disabilities for the first 25 employees of the enterprise and one additional person with disabilities for every additional 50 employees of the enterprise. Employers who fail to hire the required number of persons from designated groups must pay a contribution equal to the national minimum wage per person per month to the Social Employment Fund. The payment is made through the social and health insurance system, and the procedure should have been streamlined by a specific Instruction of the Minister of Finance within Decembers 31<sup>st</sup>, 2023”.

[11] Article 3, point 4, paragraph c): “Disabled individuals, including persons who are deaf and work-disabled individuals assessed as partially capable of work by the relevant commissions.”



Our analysis shows that the Social Employment Fund is not yet operational, and the related Instruction of the Ministry of Finance has still not been approved. We invited the Ministry of Economy and Innovation which also oversees the employment portfolio to comment on this matter, but no response was received.

**Recommendation 6:** Implement and make effective a dedicated Social Employment Fund to support the labour-market inclusion of disabled individuals by financing employment related measures such as vocational training, workplace adaptations, and skills development. The Fund could support initiatives such as job-coaching, supported employment schemes, entrepreneurship grants for disabled individuals, and incentives for employers who demonstrate inclusive hiring practices.

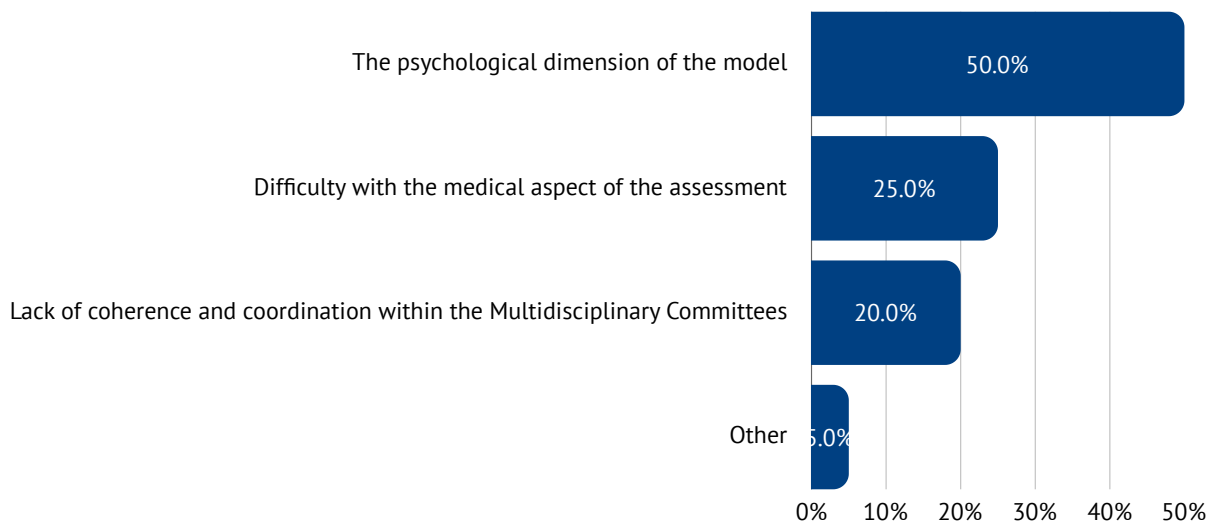
**Finding 7:** There is a perception among key stakeholders, that medical diagnoses continue to determine the classification of disabilities. This persists despite the aim of the new model, which promotes a holistic understanding of health and illness by considering not only biological factors but also psychological aspects such as thought and behaviour.

The Commissioner for Protection from Discrimination has investigated several cases involving individuals who were removed from the payment scheme following the introduction of the bio-psycho-social assessment and who were not offered any alternative services. For example, there have been complaints from persons with diabetes who were excluded from the scheme. These complaints often take the form of straightforward questions such as: “We were previously beneficiaries, and now we are not.” While the Commissioner has provided explanations regarding the principles of the new scheme, the institution cannot challenge the medical diagnoses issued by the Multidisciplinary Disability Assessment Commissions- stated by the Commissioner.

The MEDPAK survey results also indicate that respondents experienced difficulties in understanding the psychological and social components of the assessment. Half of the respondents (50%) reported challenges related to the psychological dimension of the model, largely due to the limited availability of psychologists and social workers. A further 25% reported difficulties with the medical aspect of the assessment, including unclear or overly complex medical terminology and uncertainty regarding the required supporting documents. In addition, 20% highlighted a lack of coherence and coordination within the Multidisciplinary Commissions.

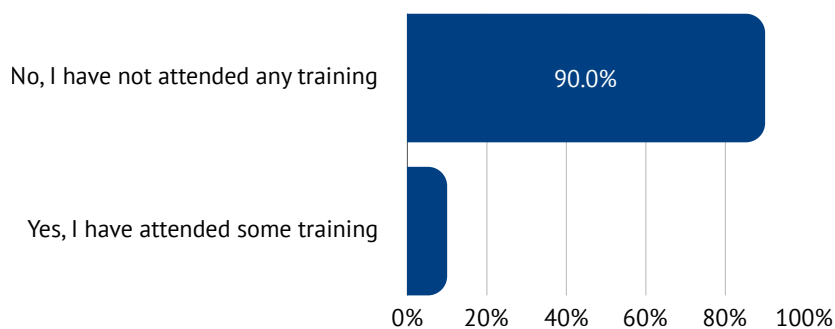


**Graphic 4:** Which part of the assessment do you consider most challenging?



Furthermore, many stakeholders in the disability sector report that medical diagnoses continue to play a decisive role in determining disability categories and associated benefits. As they note, “Assessments from the Multidisciplinary Commission are often based solely on the percentage of impairment, without adequately considering the impact of social barriers on an individual’s functioning.” This approach leads to a mismatch between a person’s actual needs and the financial support they receive. When MEDPAK asked disabled people and their families about any educational activities provided to them regarding the biopsychosocial model, 90% of respondents reported that they had not received any training or participated in any communication activities that would have helped them understand the benefits and challenges of this new model.

**Graphic 6:** Have you participated in any training on the psychosocial model?





**Recommendation 7:** Promote a clear shift from a diagnosis driven mindset to a holistic, biopsychosocial understanding of disability by investing in awareness, training, and consistent practice across all levels of the assessment system. This should include targeted communication campaigns for professionals, disabled individuals, watchdogs to explain that disability classification is no longer determined solely by medical diagnoses, but by how health conditions interact with psychological factors, behaviour, and social barriers. Training programmes for assessors, medical staff, social administrators, and other relevant actors part of the process should emphasise functional assessment, lived experience, and contextual factors, helping stakeholders and practitioners move away from a narrow clinical lens. Standardised tools, case examples, and decision-making guidelines can reinforce this shift in daily practice.

**Finding 8:** There are contradictory data provided by different government institutions, such as the National Agency for Employment and Skills and the State Labour Inspectorate, creating confusion about the actual employment situation of disabled people in Albania. Moreover, we were unable to obtain primary data on employment progress or on future strategies to improve employment outcomes for disabled people, due to the limited capacity of AKPA staff to participate in our interviews.

There are contradictory data reported by different state institutions regarding employment from 2020 onward.

According to the State Labour Inspectorate, the level of employment has declined over the past three years, falling by almost half in 2024 alone. They attribute this decline to employers failing to declare the employment of persons with disabilities to unlawfully avoid social insurance payments.

Also, employees often accept this arrangement because they fear losing their disability benefits or having them reduced if their employment is formally declared. However, the Labour Inspectorate inspects only about 7% of all employers in Albania, meaning that these findings are based solely on the limited sample described above.



**Table 2:** *Labor Inspectorate - Employment of persons with disabilities*

<b>State Labor Inspectorate</b>		
The employment of People with Disabilities		
<b>2022</b>	<b>2023</b>	<b>2024</b>
111	103	46

On the other hand, AKPA reports more optimistic data regarding the employment rate of disabled people. According to AKPA, the number of employed individuals increased from 32 in 2021 to 379 in 2024. Additional details confirming this upward trend are presented in the table below. Moreover, based on the degree of budget implementation, the actual versus planned achievement for 2020 was only 61%, with 80 employees planned to be hired but only 49 disabled people actually employed that year. We were unable to access the most current data on the budget implementation due to the lack of published statistics.

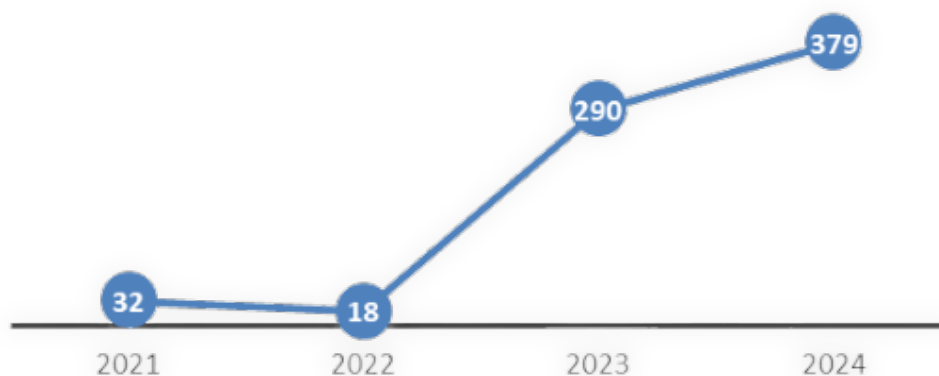
Despite our numerous requests to AKPA for a meeting to discuss employment data for disabled people, the training modules and curriculum, data on the number of disabled people trained, and the number of employers who have adopted special arrangements, AKPA was dismissive of our request. As a result, we are unable to determine whether the employment trend is increasing or declining, nor were we able to discuss next steps, employment strategies, or potential incentives for employers to hire more disabled people and be recognised for their inclusiveness and responsible practices.

**Table 3:** *AKPA- Employment of persons with disabilities*

<b>AKPA</b>		
The employment of People with Disabilities		
<b>2021</b>	<b>2022</b>	<b>2023</b>
32	18	290



**Graphic 6:** AKPA- *Employment of persons with disabilities*



**Source:** AKPA

There is also a lack of data on the absolute number of disabled people in employment, the disability employment rate (the number of disabled people in employment divided by the total number of disabled people), and the difference between the employment rates of disabled and non-disabled people (known as the disability employment gap), i.e. statistics published by Eurostat show that the disability employment gap in the European Union in 2024 was 24.0 percentage points. As a result, it is difficult to assess the employment situation of disabled people in Albania following the reform implemented in 2019, or to evaluate the progress made in improving employment outcomes for disabled people, one of the key components of the Disability Strategy 2021–2025, and to compare with other countries disability statistics.

**Recommendation 8.1:** Collect and publish accurate data about disability. In more detail, statistics should include, among others:

- Number of disabled people in employment
- Disability employment rate
- Disability employment gap for the working age 16-65
- Number of disabled people against the working age population
- Disability employment gap changes with age
- Disabled female employment rate against disabled male employment rate



**Recommendation 8.2:** Prepare an action plan in the new nationality strategy on how to make the world of work more inclusive and accessible by setting out proposal for disabled people not only to start but also stay at work; encourage employers to recruit, retain and progress their disabled employees and to create inclusive workplaces and provide reasonable adjustments; strengthen rights in the workplace by encouraging flexible working and improving access to advice on employment rights for disabled people and employers, explore with disabled people what extra help would be most useful for those wishing to start a business, champion opportunities for disabled people in the Civil Service and ensure the support to thrive at work.

## LIGJORE

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**Finding 9:** The physical appearance of a person with disabilities before the Multidisciplinary Disability Assessment Commission is required as a rule, even in cases where the individual is in a situation of genuine impossibility to appear (due to physical or psycho-motor impairments, advanced diagnoses accompanied by severe conditions, etc.).

This standard is not consistent with the principles of the biopsychosocial assessment framework. There is an ambiguity between different legal acts, which leads into practice to confusion regarding the mandatory requirement for the applicant's physical presence before the Multidisciplinary Disability Assessment Commission.

In cases of severe disability, this requirement creates significant logistical difficulties and additional costs, particularly for individuals living in rural areas with limited transport options. Moreover, no budget has been allocated to cover the expenses for members of the Multidisciplinary Disability Assessment Commissions to visit applicants in their place of residence when such visits are necessary.



Insights from interviews with Government representatives indicate that the physical appearance of disabled individuals before the Commission is considered essential in all cases. According to these institutions, in-person presence ensures a proper bio-psycho-social assessment conducted in a transparent and effective manner, prevents abusive practices, enables verification of whether the individual resides at their declared address in the Republic of Albania, and confirms the stated diagnosis based on documentation prepared by the family physician, specialist physician, and other relevant medical professionals.

However, our analysis of the existing legislation shows that the physical appearance of disabled individuals before the Multidisciplinary Disability Assessment Commission is not expressly required as a standard by primary legislation. Specifically, Law No. 57/2019, “On Social Assistance in the Republic of Albania,” Article 17, paragraph 1, provides that “disability-related payments shall be granted based on the decision of the commissions referred to in Article 8 of the Law, which assess disabilities within their respective competencies. The criteria, procedures, and documentation for assessing and granting payments for disabled individuals, as well as for their personal assistants, are to be determined by a decision of the Council of Ministers.”

On the other hand, Council of Ministers Decision No. 722, dated 11.11.2019, Section III, point 1, states that “the bio-psycho-social assessment process includes: .....an interview with the applicant at the disability assessment office conducted by the Multidisciplinary Disability Assessment Commission, composed of physicians and social workers,,,,,”. Based on this provision, the physical appearance of the applicant appears to be mandatory in all cases, with only one implicit exception. The Application Form, Medical Assessment for the Determination of Disability by the Specialist Physician, approved as an annex to CMD No. 722, provides in point 9 that: “The specialist physician may recommend that the assessment for granting disability status be conducted at the applicant’s residence, taking into account the degree of impairment of bodily functions and structures.”

The standard established by the CMD is not fully aligned with the principles of the bio-psycho-social assessment framework. In practice, there are individuals with severe disabilities, those lacking legal capacity, under guardianship, or with long-standing, confirmed, and irreversible diagnoses, whose physical appearance before the Commission is not only unnecessary but may also negatively affect their well-being and that of their family members.



Moreover, there are cases where this this requirement creates logistical difficulties for disabled individuals and their family members, entails high and often unaffordable costs, particularly for persons living in rural areas with poor commuting, in difficult social conditions, lacking close relatives to accompany them.

This gap was also discussed with members of the Multidisciplinary Commissions, who noted that in such severe cases they conduct assessments in the applicants' homes or care settings, despite lacking the logistical and financial resources needed to carry out interviews at the place of residence.

**Recommendation 9.1:** Introduce the necessary amendments to Council of Ministers Decision no. 722, dated 11.11.2019, “On Determining the Amount, Criteria, Procedures and Documentation for the Assessment and Granting of Disability Status and Personal Assistant, and the Responsible Structures and Their Duties,” to allow the applicants-disabled individuals to be interviewed in their place of residence when their health, mobility limitations, or personal circumstances make it difficult or impossible to attend assessments in person. This amendment should clearly define eligibility criteria for home-based interviews, outline the responsibilities of the Multidisciplinary Commissions, and establish procedural safeguards to ensure that home assessments are conducted with the same rigour, dignity as those carried out on Social Service premises.

**Recommendation 9.2:** Allocate the logistical, human, and financial resources required for Multidisciplinary Commissions to conduct and properly document interviews outside Social Service settings. This includes providing transportation, portable assessment tools, and adequate staffing to ensure that home visits do not delay the overall assessment process.

**Finding 10:** The Notification of the Decision issued by the Medical Commission for the Assessment of Disability does not include all the essential elements required for an administrative act. The approved format currently in use lacks clarity.

Pursuant to Article 99 of Law No. 44/2015, “The Code of Administrative Procedures of the Republic of Albania,” an administrative act must clearly include, among other required elements, the legal basis, the reasoning of the decision, and the court before which an appeal may be filed.

Although the Notification of the Decision issued by the Medical Commission for the Assessment of Disability clearly identifies the administrative authority, the body of the Decision Letter lacks several key elements required by law, as following:



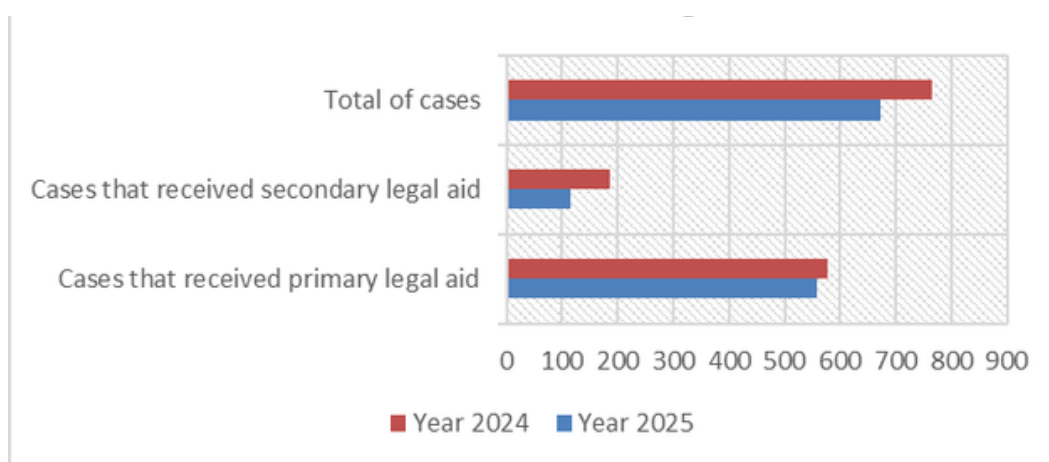
i) the right to appeal to the superior administrative body,

ii) the legal basis on which the decision relies (including the relevant article of the law and the applicable Council of Ministers Decision), and

iii) the competent court responsible for examining the appeal.

These elements are essential to ensuring full transparency in the Commission's decision-making process. Their inclusion would also provide more clarity to the parties concerned and enable the effective exercise of the right to appeal. From the official data provided by the Ministry of Health and Social Welfare it results that the number of appeals for review to the Complaint Review Commissions at the General Directorate of the State Social Service during the reporting period averages around 920 complaints per year. In addition, according to the data provided by the Directory of the Free Legal Aid, there is sustained commitment to providing legal services to this vulnerable category, as well as the ongoing need for legal support, both in terms of information provision and legal representation.

**Graphic 7:** Cases that received free legal aid





**Recommendation 10:** Make amendments to the Notification of Decision Form issued by Multidisciplinary Commissions to ensure that it clearly sets out the applicant’s right to appeal, the legal basis for the decision, and the competent authority or court responsible for reviewing the appeal. This improved form should present all essential procedural information in a clear, accessible, and user-friendly manner so that disabled individuals fully understand their rights and the steps available to challenge a decision. It should specify the timeframe for submitting an appeal, the administrative body that must first review the complaint, and the judicial authority that has jurisdiction if the applicant seeks further redress.

**Finding 11:** Although disabled people who require a hygienic and sanitary support package are legally entitled to an additional income benefit, no beneficiary determinations have been issued by the Multidisciplinary Disability Assessment Commissions. This is because the necessary secondary legislation—defining the benefit amount and the procedures for its implementation has never been adopted. This regulatory omission, attributable to the Ministry of Health and Social Welfare, has effectively prevented the measure from being applied for more than five years, despite the presence of eligible beneficiaries, as also noted by the Ombudsman.

Council of Ministers Decision (CoMD) No. 722, dated 11.11.2019, “On determining the amount, criteria, procedures and documentation for the assessment of disability, personal assistance, and the responsible structures thereof,” Chapter IV, point 5, provides for the allocation of a hygienic-sanitary package to individuals assessed as needing it. The decision states that disabled individuals who are entitled to such a package should receive an additional income payment to cover its costs, in an amount established by the legislation in force. Implementation of this provision falls under the responsibility of the Medical Commissions for the Assessment of Disability at both local and central levels.

However, discussions with stakeholders indicate that the hygienic-sanitary package has not been granted to any disabled individuals. Despite the legal provision and the guidance on bio-psycho-social assessment, no subordinate legislation appears to have been issued to determine the amount of the benefit. As a result, individuals who may have met the eligibility criteria have been unable to access this right. The adoption of a subordinate normative act, potentially by the Ministry of Health and Social Welfare, would establish the necessary details and conditions for implementing the hygienic-sanitary package, thereby enabling its practical application as required by CMD No. 722.



This issue has also been identified by the People’s Advocate (Ombudsman), which conducted a thorough analysis of the legal framework following a concrete and well-substantiated complaints. Given the significance of the matter, the institution carried out an in-depth legal review and issued recommendations aimed at resolving the issue systemically.

These include:

- (i) the immediate adoption of measures to issue the Instruction implementing CMD No. 722, dated 11.11.2019, Chapter IV, point 5; and
- (ii) the adoption of mechanisms enabling disabled individuals, classified as having a “severe” level of disability by the Multidisciplinary Disability Assessment Commissions, to benefit from the hygienic-sanitary package for the period prior to the adoption of the subordinate normative act, based on their medical diagnoses, in order to acknowledge and remedy this previously denied right.

**Recommendation 11:** Our work supports the recommendations provided by the Ombudsman, recognising their essential role in improving the overall functioning of the disability assessment system. The following actions reinforce and build upon those recommendations:

- The immediate adoption of measures to issue the Instruction implementing CoMD No. 722, dated 11.11.2019, Chapter IV, point 5; and
- The adoption of mechanisms enabling disabled individuals, classified as having a “severe” level of disability by the Multidisciplinary Disability Assessment Commissions, to benefit from the hygienic-sanitary package for the period prior to the adoption of the subordinate normative act, based on their medical diagnoses, in order to acknowledge and remedy this previously denied right.



# Overall Recommendations

The Government of Albania should develop a **National Long - Term Disability Strategy 2026-2030** setting out concrete actions to improve the everyday lives of all disabled people. This should include immediate commitments to enhancing the quality of life of disabled individuals, ensuring their involvement in policy-making and service delivery, and outlining the specific actions each government department must take to ensure effective implementation of the Strategy.

- ▶ *The Strategy should articulate a long-term governmental vision to transform the lived experience of disabled people by addressing core pillars such as inequalities in education, employment, housing, transport, public services, and civic life, amongst others.*
- ▶ *The Strategy should be shaped by concerns and insights of disabled individuals, making it far broader in scope than the National Disability Strategy 2021–2025. A meaningful, wide-ranging listening exercise, not limited to feedback from just one or two civil society organizations, should be undertaken to ensure the Strategy sets out concrete actions that genuinely improve all aspects of disabled people’s lives.*
- ▶ *To avoid remaining aspirational only, the Strategy must include a fully developed long-term implementation plan with measurable outcomes, robust monitoring and evaluation mechanisms, genuine engagement with disabled people, adequate funding, and strong interdepartmental coordination.*
- ▶ *The Strategy should also include an awareness-raising campaign that promotes the understanding that disability is everyone’s business, and encourage positive changes in individual behavior. It should further outline how the government will work with wider society to drive long-term transformation change, including partnerships with businesses.*
- ▶ *Establish a clear process for monitoring and reporting the National Disability Strategy’s achievements on an annual basis, using the outcomes, outputs, and indicators defined within the Strategy. Ensure that monitoring reports are published regularly to promote transparency and enable civil society organizations and other stakeholders to contribute to effective implementation by assessing the Strategy’s progress.*

In addition, the specific recommendations outlined above should be addressed and incorporated into the National Disability Strategy, where relevant.



# Part 2

## FINANCIAL KEY FINDINGS & RECOMMENDATIONS



**Finding 1.1.** Expenditures allocated to people with disabilities and their caregivers by the Ministry of Health and Social Welfare increased from 15.86 billion ALL in 2019 to 19.6 billion ALL in 2024. However, the number of beneficiaries declined by approximately 2,864 individuals, raising concerns regarding the efficiency and effectiveness of public spending in this area. Direct cash benefits for people with disabilities range between 10% and 21% of the national average wage and remain considerably lower than those provided in comparable EU countries.

**Finding 1.2.** This reform, fully implemented in January 2023, aimed to reduce abusive cases by 10% and decrease expenditures by 27% by 2024. Although the number of beneficiaries has declined, total allocations have increased. Furthermore, the absence of clearly defined performance indicators to measure abusive cases makes it difficult to determine whether the stated objectives have been fully achieved.

**Finding 1.3.** There are a lack of clear implementation guidelines and a fragmented administration of social funds at the municipal level. Many municipalities have either not established dedicated social funds or continue to finance services through existing budget programs rather than through earmarked funding mechanisms.

**Recommendation 1.1.** A progressive and sustainable increase in state budget allocations for people with disabilities is recommended, with the aim of improving their quality of life and ensuring the full exercise of their fundamental rights. Increased funding should not be limited to direct cash benefits but should also prioritize the expansion and strengthening of community-based social services, support for independent living, and the provision of integrated social and healthcare services. In this context, budget planning should be grounded in actual needs, service cost analysis, and continuous monitoring of the impact of public expenditures.

**Recommendation 1.2.** Clear and binding standards should be established for the collection, analysis, and publication of disaggregated data (by type of disability, geographic location, age, and gender) across all relevant ministries and responsible institutions. Monitoring should prioritize performance indicators and measurable outcomes achieved, rather than focusing solely on levels of financial expenditure.

**Recommendation 1.3.** Stronger coordination mechanisms should be established between line ministries and local government units to ensure a holistic and integrated approach to service delivery and the implementation of policies for people with disabilities.

# Employment and Professional Training



**Finding 2.** Despite legislation mandating the employment of people with disabilities and the existence of the Social Employment Fund, the implementation of these policies has remained minimal and largely ineffective. The number of registered unemployed people with disabilities declined significantly from 542 in 2019 to 237 in 2022. At the same time, the number of employed people with disabilities dropped sharply from 82 in 2019 to only 18 in 2022. State budget allocations for employment promotion programs targeting people with disabilities account for only 1% of total expenditures, reflecting a persistent trend. The implementation of the social enterprise policy was delayed and has produced limited results.

**Recommendation 2.** The establishment and effective functioning of social funds in every municipality should be ensured through clear implementation guidelines and strengthened administrative capacities. The factors contributing to the limited effectiveness of employment policies for people with disabilities should be carefully analyzed, and more targeted programs should be developed, supported by adequate funding and strong monitoring mechanisms.

## Education

**Finding 3.** The number of assistant teachers has increased significantly, from 620 in 2019 to 2,167 in 2024, with estimated expenditures reaching 2.34 billion ALL in 2024. At the same time, contradictory data are observed alongside a substantial decline in the number of students enrolled in resource centers (from 700 in 2019 to 160 in 2024) despite increased spending allocated to these centers. There is no structured performance assessment of these centers to evaluate their effectiveness and impact. Data provided by the Ministry of Education is partial, unclear, and in some cases contradictory, particularly regarding scholarship schemes, the provision of free textbooks, and investments in school accessibility.

**Recommendation 3.** Data inconsistencies concerning students with disabilities should be addressed and rectified, and a stable and transparent system for their monitoring should be ensured. Investment in school infrastructure should be strengthened to guarantee accessibility, alongside the allocation of dedicated resources for the professional development of assistant teachers and other support specialists.

# Accessibility



**Finding 4.** Accessibility is a key objective of the National Action Plan for Persons with Disabilities, accounting for 19% of the total planned cost. However, its implementation remains partial and fragmented. There is a lack of transparency and accountability on the part of the ministry responsible for transport regarding the implementation of this objective. The report of the Supreme State Audit concludes that the existing legal framework is not being properly implemented. At the local level, municipalities lack specific accessibility plans and systematic monitoring mechanisms, and the legislation is not fully aligned with EU standards. Regarding information accessibility, including the e-Albania platform, measures have been scheduled for 2026, and to date no concrete action has been undertaken.

**Recommendation 4.** Specific action plans, accompanied by clear timelines, should be developed and implemented to ensure physical accessibility in public infrastructure and road transport, in alignment with EU standards. The implementation of digital accessibility measures for the e-Albania platform and the websites of public institutions should be accelerated, ensuring that these measures become operational well before 2026.



e-albania

# FINANCIAL ANALYSIS



This chapter analyses the funds allocated from the state budget to fulfil the obligations established under the current legislation concerning persons with disabilities during the period 2019–2024. The data used refer to the Medium-Term Budget Programs for the period 2019–2024 and the monitoring reports published by the relevant line ministries. In some cases, additional research was conducted through periodic institutional monitoring reports to identify data on achieved results.

The main reference document used for monitoring budget expenditures is the National Action Plan for People with Disabilities 2021–2025, approved by Council of Ministers Decision No. 279, dated 12 May 2021. The Plan has been designed in line with standard budget planning and monitoring practices, disaggregating policy objectives across different sectors into specific objectives and concrete measures for their implementation.

Financial data tracking was carried out by referring to the annual monitoring reports published by the relevant line ministries for each year of the period 2019–2024, at the level of product/project and performance indicators, while also attempting to analyze the data in terms of beneficiaries and achieved results. Given that the information required for a comprehensive monitoring of expenditures is highly specific, written requests were also addressed to the responsible institutions to complete the analytical framework. The data provided by these institutions have been incorporated as part of this analysis.

The National Action Plan for Persons with Disabilities 2021–2025 adopts a cross-sectoral approach, establishing objectives and measures across multiple policy areas whose outcomes directly affect the daily lives of persons with disabilities. It aims to improve the social and economic integration of this group through policies structured across eight main areas: 1) accessibility, 2) justice, 3) employment, 4) education, 5) health, 6) social inclusion, 7) participation in public life, and 8) political participation.

According to the National Action Plan for Persons with Disabilities 2021–2025 (NAP-PWD), the total planned budget amounts to ALL 1,466,608,650 (approximately EUR 11.8 million). The financing is expected to be covered 75% by the state budget, 7% by donor contributions and other sources, while an 18% financing gap remains. The distribution of the planned budget across the main objectives is presented as follows:



**Table 4:** *Cost of the Objectives of the Action Plan for Persons with Disabilities*

Policy Objectives of the Action Plan	Total Cost 2021–2025 (ALL)	Share of Total
<b>Objective 1:</b> Ensuring accessibility in environments, services, transport and information	289,475,204	19.7%
<b>Objective 2:</b> Guaranteeing equal access to the justice system	214,084,632	14.6%
<b>Objective 3:</b> Increasing participation in the labor market and promoting equal opportunities for decent work	135,445,952	9.2%
<b>Objective 4:</b> Ensuring and providing inclusive and quality education	218,406,474	14.9%
<b>Objective 5:</b> Improving the quality of life of persons with disabilities through accessible services and benefits	119,414,160	8.1%
<b>Objective 6:</b> Providing accessible and affordable healthcare	359,452,088	24.5%
<b>Objective 7:</b> Ensuring the full inclusion of persons with disabilities in public and political life in Albania and enabling the protection of their interests	83,866,868	5.7%
<b>Objective 8:</b> Creating synergies between institutions and different sectors to promote and monitor the full, continuous and sustainable realization of the rights of persons with disabilities	46,463,272	3.2%
<b>TOTAL</b>	<b>1,466,608,650</b>	<b>100%</b>

*Source: National Action Plan for Persons with Disabilities 2021–2025*

Based on the analysis conducted in this report, we present a summary of the budgetary funds spent on policies that could be identified in monitoring reports and annual performance analyses of the institutions responsible for people with disabilities.

It should be noted that, due to existing limitations, the financial information analyzed in this report cannot be directly linked to the allocations planned under the National Action Plan for People with Disabilities 2021–2025. As a result, establishing a clear connection between the funds spent from the state budget and the measures envisaged in the Action Plan remains difficult.



**Table 5:** Funds spent from the state budget for the period 2019-2024 for the category of PWD

Policy Area	Expenditures from the State Budget 2019–2024 (ALL)	Share of Total
Area 1: Social Care	112,776,114,526	94.6%
Area 2: Education	6,342,119,176	5.3%
Area 3: Employment and Vocational Training	36,493,454	0.0%
TOTAL	119,154,727,155	100.0%
Total State Budget 2019–2024	3,678,899,350,000	3.2%

*Source: Ministry of Finance, actual budget in years*

\* The expenditures calculated for the education sector include the total costs incurred by the state budget for free textbooks and support for children in need. Due to the lack of precise statistics, it is not possible to determine the proportion of funds specifically allocated to people with disabilities.

As illustrated in the analysis, the largest share of funds spent from the state budget for people with disabilities is allocated to the social care sector, particularly through direct cash benefits provided to this group and their caregivers. In contrast, expenditures related to other policy areas, such as education, employment, and vocational training, remain limited or negligible. This indicates that funding for policies aimed at providing alternative services or reintegration programs for people with disabilities remains minimal.

It should be noted that expenditures related to public investments have not been included in this analysis, as the data published in the budget monitoring reports of the relevant line ministries do not allow for the identification of projects directly linked to persons with disabilities.

When analyzing the share of these expenditures in relation to the total state budget spent during the period 2019–2024, they account for only 3.2% of the total.

The following section presents a detailed analysis in both beneficiary and financial terms, focusing on the areas of social care, education, employment, and vocational training, where relevant information was identified. Our research also examined other areas, such as accessibility in environments, transport, and information, for which a narrative overview of the findings has been prepared.



## 6.State budget expenditures for people with disabilities in the area of Social Care

In the area of social care, the main objective of the National Action Plan for Persons with Disabilities is “to improve the quality of life of persons with disabilities through accessible, affordable and person-centered services and benefits.” The objectives and measures envisaged under this goal aim to strengthen the social protection system for persons with disabilities, building on the human rights model and the principles of independent living. A particular attention is given to monitoring the effects of disability assessment under the new biopsychosocial model, to ensure respect for the dignity and rights of persons with disabilities. At the same time, emphasis is placed on the provision of integrated social services, combining financial support with quality social care services to increase the effectiveness and sustainability of support. Through the development of new community-based social services, the plan promotes independent living and the active inclusion of persons with disabilities in the community, while reducing reliance on institutionalization. Based on the above, we analyzed the monitoring reports of the ministry responsible for social care, as well as the medium-term budget program documents published for the periods 2025–2027 and 2026–2028. The budget allocated over the years and the number of beneficiaries (persons with disabilities and their caregivers) are presented below.

**Table 6:** *Number of People with Disabilities beneficiaries and caregivers and budgetary funds 2019–2028*

Year	Ministry	Budget Program	Product Code	Product Description	Budget Type	Quantity	Budget Expenditures (ALL)
2019	MoHSP	Social Care	91307AB	People with Disabilities and caregivers receiving benefits	Initial plan	163,000	15,850,000,000
2019	MoHSP	Social Care	91307AB	People with Disabilities and caregivers receiving benefits	Revised plan	163,000	15,884,500,000
2019	MoHSP	Social Care	91307AB	People with Disabilities and caregivers receiving benefits	Actual	166,968	15,860,125,268
2020	MoHSP	Social Care	91307AB	People with Disabilities and caregivers receiving benefits	Initial plan	165,000	16,405,000,000
2020	MoHSP	Social Care	91307AB	People with Disabilities and caregivers receiving benefits	Revised plan	165,000	18,621,593,001
2020	MoHSP	Social Care	91307AB	People with Disabilities and caregivers receiving benefits	Actual	169,530	18,465,130,055
2021	MoHSP	Social Care	91307AB	People with Disabilities and caregivers receiving benefits	Initial plan	172,410	18,745,540,000
2021	MoHSP	Social Care	91307AB	People with Disabilities and caregivers receiving benefits	Revised plan	—	17,273,540,000
2021	MoHSP	Social Care	91307AB	People with Disabilities and caregivers receiving benefits	Actual	162,581	17,079,189,261
2022	MoHSP	Social Care	91307AB	People with Disabilities and caregivers receiving benefits	Initial plan	167,000	16,990,000,000
2022	MoHSP	Social Care	91307AB	People with Disabilities and caregivers receiving benefits	Revised plan	167,000	18,535,928,000
2022	MoHSP	Social Care	91307AB	People with Disabilities and caregivers receiving benefits	Actual	161,683	18,429,006,477
2023	MoHSP	Social Care	91307AB	People with Disabilities and caregivers receiving benefits	Initial plan	160,000	17,736,000,000
2023	MoHSP	Social Care	91307AB	People with Disabilities and caregivers receiving benefits	Revised plan	160,000	18,568,258,000
2023	MoHSP	Social Care	91307AB	People with Disabilities and caregivers receiving benefits	Actual	163,298	18,349,195,850
2024	MoHSP	Social Care	91307AB	People with Disabilities and caregivers receiving benefits	Initial plan	161,000	17,918,000,000
2024	MoHSP	Social Care	91307AB	People with Disabilities and caregivers receiving benefits	Revised plan	161,000	19,735,492,000
2024	MoHSP	Social Care	91307AB	People with Disabilities and caregivers receiving benefits	Actual	164,104	19,612,354,218
2025	MoHSP	Social Care	91307AB	People with Disabilities and caregivers receiving benefits	Initial plan	92,000	15,238,000,000
2026	MoHSP	Social Care	91307AB	People with Disabilities and caregivers receiving benefits	Initial plan	94,000	15,268,000,000
2027	MoHSP	Social Care	91307AB	People with Disabilities and caregivers receiving benefits	Initial plan	95,000	15,712,000,000
2028	MoHSP	Social Care	91307AB	People with Disabilities and caregivers receiving benefits	Initial plan	98,000	15,882,000,000
2028	MoHSP	Social Care	91307AB	People with Disabilities and caregivers receiving benefits	Initial plan	98,000	15,882,000,000

Source: 2019-2024 MSHS Budget Monitoring Reports and 2025-2028 MTBP Documents

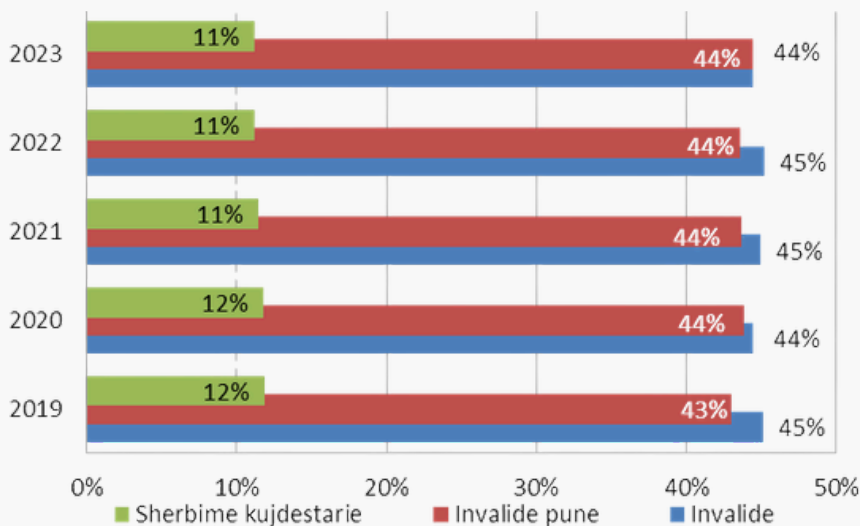
Funds allocated by the Ministry of Health and Social Welfare as direct payments to people with disabilities and their caregivers have increased over the period from 2019 to 2024. In 2019, approximately 166,968 people with disabilities and their assistants benefited from financial support, with a total allocation of 15.86 billion ALL. By 2024, the number of beneficiaries had decreased by 2,864 compared to 2019, while the total budget allocated as financial support increased to ALL 19.6 billion. The Medium-Term budget program prepared by the Ministry of Health and Social Welfare for the period 2025–2028 indicates that both the number of beneficiaries and the corresponding budget allocations are expected to decline. This reduction results from the transfer of payment funds for the category of labor invalids to the Social Institute, as part of efforts to facilitate access for this category to all disability-related benefits through a single service point. According to the monitoring reports published by the Ministry of Health and Social Welfare, detailed disaggregated data are not provided separately for people with disabilities and for their caregivers. In addition, these reports do not include published statistics on the distribution of beneficiaries by category. Despite the absence of such data in the ministry’s reports, the Institute of Statistics (INSTAT), supported by the State Social Service, has published detailed data on beneficiaries by category, which are presented below:

**Table 7: Average number of persons with disabilities receiving disability allowance and care services, 2019–2023**

Description	2019	2020	2021	2022	2023
Total disabled persons	71,032	73,718	71,281	70,208	72,474
By category:					
Blind	12,399	12,414	12,143	12,445	12,982
Paraplegic / Tetraplegic	6,666	6,641	6,244	5,973	5,857
Mental and physical disabilities	51,967	54,663	52,894	51,790	53,635
Care service beneficiaries	18,650	18,780	18,726	18,118	18,340
Labor invalids	74,661	74,734	73,347	72,780	72,484
Total beneficiaries	166,233	168,242	163,368	161,117	163,298

Source: State Social Service and INSTAT

**Graphic 8: Share of beneficiaries by disability category**





As shown in the table and the graph, the number of caregivers/personal assistants for persons with disabilities has remained at relatively constant levels during the period 2019–2024, representing on average around 11% of the total number of beneficiaries. Meanwhile, the share of labor invalids in relation to other disability categories associated with mental or physical impairments remains at approximately 44%.

In 2021, a decrease in the number of beneficiaries is observed compared with the figures for 2019–2020. The reduction amounts to approximately 4,889 beneficiaries and remains at similar levels throughout the 2022–2024 period. We assess that this change can be attributed to initiatives undertaken by the Ministry of Health and Social Welfare to reform the process related to the assessment of disability, as well as to initiatives aimed at deinstitutionalization and the expansion of social services. Despite the conclusions drawn from the analysis of beneficiary numbers, it should be noted that the Ministry of Health and Social Welfare monitoring reports do not provide analyses or detailed information on the progress achieved by the end of 2024 regarding the biopsychosocial assessment reform, which was piloted in the city of Tirana, its expansion across the entire territory of Albania, and the results achieved in accordance with the planned implementation activities.

According to the limited data published on the official website of the State Social Service, the Biopsychosocial assessment model in Albania began its pilot phase in 2017 in two administrative units in the Tirana Region (Units No. 6 and No. 7). The reform was implemented with the support of the World Bank project “Modernization of Social Assistance in Albania”. In 2019, this assessment model was extended to all administrative units in the Tirana Region, and by the end of 2021 it was expanded to the Durrës and Elbasan Regions. The reform of the disability assessment scheme was completed in January 2023, when it was extended throughout the entire territory of Albania. At the conclusion of the reform, 37 multidisciplinary assessment commissions were established at the regional level, as well as three Appeals Review Commissions, which review citizens’ complaints regarding decisions issued by the Regional Disability Assessment Commissions (KVSHAK).<sup>12</sup>

In June 2019, the Ministry of Health and Social Protection approved, through Council of Ministers Decision No. 380, dated 5 June 2019, the policy document titled “Reform of Disability Assessment in the Social Protection System and the Action Plan 2019–2024 for its Implementation”. This document formalized the biopsychosocial disability assessment reform, which aimed to combine cash benefits with social services. The main objective of the scheme was to implement the biopsychosocial assessment model while reducing abusive cases by 10% by 2020, referring to beneficiaries who do not demonstrate a disability, and reducing expenditure on cash benefits by 27% by 2024.

[12] <https://www.sherbimisocial.gov.al/rreth-vleresimit-bio-psiko-social/>



To assess whether the biopsychosocial assessment reform has achieved its main objective, we reviewed the budget monitoring reports for the results of the social care budget program. However, we did not identify performance indicators measuring the reduction of abusive cases. Nevertheless, based on beneficiary statistics, which show a decline of nearly 3% compared to the total recorded in 2019, as reflected in the 2023 data, it can be assessed that the objective of reducing abusive cases has been partially achieved. This conclusion, however, should be interpreted with caution, as it remains unclear how the 10% target was calculated, specifically whether it was based on the total number of beneficiaries or on the number of abusive cases identified under the previous assessment model.

Regarding the 27% reduction in the fund allocated for cash benefits, the published data indicate that the total fund has instead increased, rising from ALL 15.86 billion in 2019 to ALL 19.6 billion in 2024. This increase is partly attributable to the rise in the social pension amount between 2019 and 2024, as secondary legislation regulating disability benefits links the disability payment<sup>[1]</sup> level to the value of the social pension. The achievement of the indicator related to the reduction of the benefit fund should therefore be assessed on a case-by-case basis, since disability payments and the accompanying support packages, such as energy compensation or hygiene-sanitary packages, vary depending on the individual assessment of the beneficiary.

The data published by the State Social Service remain limited, which makes it difficult to analyze the actual level of benefits and to compare how these payments have evolved under the new assessment model.

The basic disability benefit for both adults and children are set at 150% of the social pension, in accordance with Law No. 7703, dated 11 May 1993, “On Social Insurance in the Republic of Albania,” as amended. Accordingly, if in 2024 the amount of the social pension, according to the Social Insurance Institute (ISSH), was 9,710 ALL per month, the basic disability benefit was calculated at 14,565 ALL per month. Under the new assessment model, this payment varies as follows:

- a) adults over 18 with mild limitations are referred to receive services or employment; in the absence of such opportunities, they receive 60% of the basic benefit, or 8,739 ALL per month.*
- b) adults over 18 with moderate limitations receive 80% of the basic benefit, or 11,652 ALL per month.*
- c) adults over 18 with severe limitations receive 100% of the basic benefit.*
- d) adults over 18 with profound limitations receive 120% of the basic benefit, or 17,478 ALL per month.*

[13] VKM nr.772/2019 i ndryshuar “Për përcaktimin e masës, të kriteve, procedurave dhe dokumentacionit për vlerësimin dhe përfitimin e aftësisë së kufizuar e të ndihmësit personal, dhe të strukturave përgjegjëse e të detyrave të tyre”



- e) children with mild limitations are referred to receive services; in the absence of such services, they receive 75% of the amount granted to adults with mild limitations (as specified in point “a”), or approximately 6,554 ALL per month.*
- f) children with moderate limitations receive 75% of the amount granted to adults with moderate limitations (as specified in point “b”), or approximately 8,739 ALL per month.*
- g) children with severe limitations receive 75% of the amount granted to adults with severe limitations (as specified in point “c”), or approximately 10,924 ALL per month.*
- h) children with profound limitations receive 75% of the amount granted to adults with profound limitations (as specified in point “d”), or approximately 13,108 ALL per month.*

In addition to the basic disability benefit, additional support packages may be granted based on the assessment carried out by the multidisciplinary evaluation commission, as follows:

- a) Children over the age of 3 and adults who are assessed by the multidisciplinary commission as requiring a hygiene-sanitary package, in cases where they have severe or profound mobility impairments and experience urinary or bowel incontinence, are provided with such a package. The value of the hygiene-sanitary package in 2024 was 20,000 ALL per month, approved by Council of Ministers Decision No. 744/2024. This package is indexed annually based on the Consumer Price Index.*
- b) Children over the age of 3 and adults who are assessed by the multidisciplinary commission as needing a wheelchair, in cases of severe or profound mobility impairments, may be provided with one. Wheelchairs are administered by the Compulsory Health Insurance Fund through the pharmaceutical network. An analysis of the relevant secondary legislation shows that no predetermined average reimbursement price for wheelchairs has been established. Based on international practice, however, the average price of a wheelchair ranges from approximately USD 450 to USD 1,200.<sup>14</sup>*
- c) Children over the age of 3 and adults who are assessed by the multidisciplinary commission as having communication difficulties may be provided with assistive communication technology devices, which are administered by the Compulsory Health Insurance Fund through the pharmaceutical network.*
- d) Students with disabilities who attend upper secondary education or higher education programs at the first and second cycle levels receive a payment equivalent to 150% of the disability benefit during the period of their studies, for one study program only. If they are members of families benefiting from the economic assistance scheme, they receive a payment equivalent to 200% of the disability benefit during the period of their studies, also for one study program only.*

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[13] <https://www.ahealthcare.com/eurochair-2-pro-manual-wheelchair-en>; The costs presented are general information obtained from medical equipment suppliers and online healthcare retailers (such as suppliers of wheelchairs and orthopedic devices), including average costs for these items in European and local markets (e.g., medical equipment suppliers in the EU; retail prices). These prices are indicative and do not represent government-set reimbursement rates; rather, they serve to provide an understanding of the average market cost of the equipment.



Regarding the payment for caregivers/personal assistants, the cases are structured as follows:

- The payment for comprehensive assistance services amounts to 120% of the basic disability benefit, or 17,478 ALL per month in 2024.
- The payment for occasional assistance services amounts to 80% of the basic disability benefit, or 11,652 ALL per month in 2024.
- Personal assistants who provide services to more than one beneficiary receives an additional 50% of the respective payment amount for each additional beneficiary.

Finally, secondary legislation <sup>15</sup> regulating the procedures and payment levels of disability benefits provides for the right to receive sign language interpretation services for:

- a. Persons with 100% hearing loss, verified through supporting medical documentation.
- b. Persons who use sign language in daily communication, verified during the interview conducted by the multidisciplinary disability assessment commission.

If we monetize the average benefits received by a person with disabilities in Albania related to direct payments, it can be concluded that these payments range from a minimum of 8,739 ALL per month for adults with mild limitations to a maximum of 17,478 ALL per month for adults with severe limitations. If we also include the payment for a personal assistant providing comprehensive services, as well as the hygiene-sanitary package, the total monthly support may reach 54,956 ALL per month.

The monetary estimates do not include the provision of assistive devices, such as wheelchairs or other mobility-support equipment, for which no specific cost values are available. It should also be noted that these expenditures are not incurred monthly; rather, they are one-time or occasional costs of a more permanent nature, typically occurring at intervals longer than one year.

If we compare the benefits received by persons with disabilities with the average wage in Albania in 2024, which amounted to 83,401 ALL<sup>16</sup> per month, these benefits represented between 10% and 21% of that total. Compared with the minimum wage in 2024, which was ALL 40,000 per month, the direct payments received by a person with disabilities represented between 22% and 44% of the minimum wage.

[14] Council of Ministers Decision No. 431/2016, as amended, "On the determination of the criteria, documentation, procedures, and benefit levels for disability payments and personal assistance, as well as the responsible structures and their duties in pilot areas."

[15] <https://www.instat.gov.al/sq/temat/tregu-i-punes-dhe-arsimi/pagat/#tab2>

[16] [https://www.oecd.org/content/dam/oecd/en/publications/reports/2022/10/disability-work-and-inclusion\\_db6df91a/1eaa5e9c-en.pdf](https://www.oecd.org/content/dam/oecd/en/publications/reports/2022/10/disability-work-and-inclusion_db6df91a/1eaa5e9c-en.pdf)



By comparison, in high-income European Union countries<sup>17</sup>, such as Austria, Belgium, and the Netherlands, direct cash benefits typically range between 30% and 40% of the median average wage, making them at least twice as high as those provided in Albania.

The reform initiated in the field of social assistance aimed, in addition to restructuring cash benefits, to expand integrated services for persons with disabilities in the Republic of Albania. However, the network of psycho-social habilitation and rehabilitation services remains underdeveloped at the national level. Currently, it provides partial coverage limited to certain geographical areas, primarily urban, and only to specific groups of persons with disabilities.<sup>18</sup>

To achieve this objective, the Ministry of Health and Social Welfare adopted Law No. 121/2016 “On Social Care Services in the Republic of Albania,” as amended. The purpose of this law is to establish rules for ensuring and delivering social care services, which contribute to the well-being and social inclusion of individuals and families in need of social care. The financing of the provisions set out in this law is carried out through the state budget, the budgets of municipalities (local self-government units), including the Social Fund.

According to the law, the municipality, in cooperation with the ministry responsible for social affairs, establishes and administers the Social Fund, through which financial support is provided to local government units. The purpose of this support is to improve the standards and administrative capacities of existing social care services, create new services, and support the development of social policies.

According to the budget monitoring reports of the Ministry of Health and Social Welfare (MHSP) for the period 2020–2024, as well as the Medium-Term Budget Programs for the periods 2025–2027 and 2026–2028, the table below presents the expenditures from the central government budget for integrated services.

These funds represent the portion of resources transferred from the central government budget to local self-government units for this purpose. In addition, pursuant to Council of Ministers Decision No. 822/2018 “On community and residential social care services, the criteria and procedures for benefiting from them, and the amount allocated for personal expenses for beneficiaries of organized services,” persons receiving services in development centers are provided with ALL 1,000 per month as reimbursement for their personal expenses.

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[17] National Action Plan for Persons with Disabilities 2021–2025, page 18.

[18] National Action Plan for Persons with Disabilities 2021–2025, page 18.

**Table 8: Number of Integrated Services and Budget Funds Spent for the Period 2020–2024**

Year	Ministry	Budget Program	Product Code	Product Description	Budget	Quantity	Budget Expenditure (ALL)
2020	MoHSP	Social Care	91307AB	Social services for groups in need provided through a network of local social services financed by the Social Fund	Initial plan	0	70,000,000
2020	MoHSP	Social Care	91307AB	Social services for groups in need provided through a network of local social services financed by the Social Fund	Revised plan	0	135,908,901
2020	MoHSP	Social Care	91307AB	Social services for groups in need provided through a network of local social services financed by the Social Fund	Actual	14	94,481,128
2021	MoHSP	Social Care	91307AB	Social services for groups in need provided through a network of local social services financed by the Social Fund	Initial plan	20	200,000,000
2021	MoHSP	Social Care	91307AB	Social services for groups in need provided through a network of local social services financed by the Social Fund	Revised plan	20	188,030,000
2021	MoHSP	Social Care	91307AB	Social services for groups in need provided through a network of local social services financed by the Social Fund	Actual	55	147,894,616
2022	MoHSP	Social Care	91307AB	Social services for groups in need provided through a network of local social services financed by the Social Fund	Initial plan	35	200,000,000
2022	MoHSP	Social Care	91307AB	Social services for groups in need provided through a network of local social services financed by the Social Fund	Revised plan	35	195,368,000
2022	MoHSP	Social Care	91307AB	Social services for groups in need provided through a network of local social services financed by the Social Fund	Actual	35	158,818,000
2023	MoHSP	Social Care	91307AB	Social services for groups in need provided through a network of local social services financed by the Social Fund	Initial plan	45	300,000,000
2023	MoHSP	Social Care	91307AB	Social services for groups in need provided through a network of local social services financed by the Social Fund	Revised plan	45	199,077,000
2023	MoHSP	Social Care	91307AB	Social services for groups in need provided through a network of local social services financed by the Social Fund	Actual	49	176,293,132
2024	MoHSP	Social Care	91307AB	Social services for groups in need provided through a network of local social services financed by the Social Fund	Initial plan	49	320,000,000
2024	MoHSP	Social Care	91307AB	Social services for groups in need provided through a network of local social services financed by the Social Fund	Revised plan	49	324,042,154
2024	MoHSP	Social Care	91307AB	Social services for groups in need provided through a network of local social services financed by the Social Fund	Actual	54	273,565,973
2025	MoHSP	Social Care	91307AB	Social services for groups in need provided through a network of local social services financed by the Social Fund	Initial plan	80	330,000,000
2026	MoHSP	Social Care	91307AB	Social services for groups in need provided through a network of local social services financed by the Social Fund	Initial plan	95	400,000,000
2027	MoHSP	Social Care	91307AB	Social services for groups in need provided through a network of local social services financed by the Social Fund	Initial plan	105	430,000,000
2028	MoHSP	Social Care	91307AB	Social services for groups in need provided through a network of local social services financed by the Social Fund	Initial plan	115	450,000,000

*Source: Monitoring reports of the Ministry of Health, Social Affairs and Health 2020-2024 and documents of the MTBP 2025-2028*

As shown, the financing of social services for groups in need began in 2020 with a total planned fund of 70 million ALL, which was revised upward during the same year to 135.9 million ALL. The actual expenditures for that year amounted to 94 million ALL. A positive development is that the funding allocated to support these services has increased over time, rising from 94 million ALL spent in 2020 to 275 million ALL by the end of 2024. The planning trend continues to show an upward trajectory for the 2025–2028 period, reaching 450 million ALL projected for 2028. The number of services financed was 55 in 2021, followed by 35 new services in 2022, 49 services financed in 2023, and 54 in 2024. For the period 2025–2028, the number of services is projected to increase from 80 to 115 new services. However, regarding the types of services and their distribution across municipalities, the monitoring reports from 2020 onward, as well as the respective



Medium-Term Budget Program (MTBP) documents, do not provide sufficient detail to better understand their nature or the extent to which these services address the needs of persons with disabilities. At the same time, detailed information is not available regarding the social fund established in each municipality from other sources, nor do we have data on the funds allocated by local self-government units from their own municipal budgets to support people with disabilities through social services. An analysis conducted by UNDP, published in January 2023 on “The Legal Framework and Challenges of the Social Fund,” notes the following: *“The lack of specific guidelines for the establishment and administration of the social fund at the municipal level has resulted in different perceptions and realities regarding the concept and functioning of the social fund across municipalities. More than one quarter of the municipalities consulted reported that they have not established the social fund in accordance with Article 47/1 of Law No. 121/2016, indicating that the lack of an adequate budget, as well as limited capacities or infrastructure, have been key factors contributing to this situation. On the other hand, even in municipalities that reported having established the social fund in accordance with Article 47/1 of Law No. 121/2016 (71 percent of the municipalities consulted), discussions revealed that in practice the social fund does not exist as a dedicated budgetary fund. Instead, financing for social services is carried out through existing budget programs for social services. Thus, only 15 percent of the municipalities consulted reported that funding for improving standards and administrative capacities of existing social care services, establishing new services, and developing social policies is provided through the social fund, while 38 percent reported that these functions are carried out through existing budget programs for financing these services, and 33 percent through a combination of both approaches.”*<sup>19</sup>

In the 2023 annual work report published by the State Social Service, a total of 46 social care centers/projects are reported to have been supported through the Social Fund during 2023. According to the State Social Service, the main challenges related to the Social Fund at the municipal level are associated with the lack of trained staff and the fact that many services established by municipalities do not have criteria approved by the Municipal Council, nor do they comply with the criteria defined under Council of Ministers Decision No. 518/2018, “On community-based and residential social care services, the criteria and procedures for accessing them, and the amount allocated for personal expenses for beneficiaries of organized services”.<sup>20</sup> However, this analytical report does not provide data on the number of beneficiaries or specify the municipalities where the Social Fund and its services are being used to improve the lives of people with disabilities. In conclusion, the information reported by both the Ministry of Health and Social Welfare and the State Social Service regarding the Social Fund mechanism is limited and does not support the conduct of comprehensive analyses on its use and the results achieved.

[19] [https://www.undp.org/sites/g/files/zskgke326/files/2023-07/kuadri\\_ligjor\\_dhe\\_sfidat\\_e\\_fondit\\_social.pdf](https://www.undp.org/sites/g/files/zskgke326/files/2023-07/kuadri_ligjor_dhe_sfidat_e_fondit_social.pdf)

[20] <https://www.sherbimisocial.gov.al/open-data/>



This limitation also makes it difficult to assess its effectiveness in relation to the objectives and measures outlined in the National Action Plan for Persons with Disabilities for the period 2021–2025.

With regard to the funds allocated from the state budget for public residential centers during the period 2019–2028, the data below are presented at product level for the category of persons with disabilities, based on the published budget monitoring reports of the Ministry of Health and Social Welfare and the Medium-Term Budget Program documents.<sup>21</sup>

**Table 9:** *Persons with Disabilities Benefiting from Social Care Services Provided by Public Residential Centers and Budget Funds Spent or Planned for the Period 2022–2028 (in ALL)*

Year	Ministry	Budget Program	Product Code	Product Description	Budget Type	Quantity	Budget (ALL)	Expenditure
2022	13	Social Care	91307AM	Persons with disabilities benefiting from social care services	Initial Plan	197	209,430,000	
2022	13	Social Care	91307AM	Persons with disabilities benefiting from social care services	Revised Plan	197	207,485,000	
2022	13	Social Care	91307AM	Persons with disabilities benefiting from social care services	Actual	198	206,070,991	
2023	13	Social Care	91307AM	Persons with disabilities benefiting from social care services	Initial Plan	187	222,715,000	
2023	13	Social Care	91307AM	Persons with disabilities benefiting from social care services	Revised plan	187	251,622,000	
2023	13	Social Care	91307AM	Persons with disabilities benefiting from social care services	Actual	194	250,859,009	
2024	13	Social Care	91307AM	Persons with disabilities benefiting from social care services	Initial Plan	177	270,071,000	
2024	13	Social Care	91307AM	Persons with disabilities benefiting from social care services	Revised Plan	177	284,707,000	
2024	13	Social Care	91307AM	Persons with disabilities benefiting from social care services	Actual	207	284,196,551	
2025	13	Social Care	91307AM	Persons with disabilities benefiting from social care services	Initial Plan	180	282,175,000	
2026	13	Social Care	91307AM	Persons with disabilities benefiting from social care services	Initial plan	160	297,138,000	
2027	13	Social Care	91307AM	Persons with disabilities benefiting from social care services	Initial plan	140	297,138,000	
2028	13	Social Care	91307AM	Persons with disabilities benefiting from social care services	Initial Plan	120	297,138,000	

*Source: MHSWS budget monitoring reports and medium-term budget documents 2025-2028*

[21] Expenditures incurred during the period 2019–2021 for the category of persons with disabilities (PWD) are not identified as a separate budget line in the budget monitoring reports published by the Ministry of Health and Social Welfare.



The financial data extracted from the budget reports indicate that the allocated funding increased from 206.07 million ALL spent in 2022 to 284.2 million ALL spent in 2024. During the same period, the number of beneficiaries rose from 198 in 2022 to 207 in 2024. The medium-term budget planning prepared by the Ministry of Health and Social Welfare projects a reduction in the number of beneficiaries by an average of around 20 per year over the period 2025–2028. The breakdown of beneficiaries by category is not published in the monitoring reports of the ministry responsible for social protection. However, the official website of the State Social Service provides statistical information on beneficiaries of services in social care institutions, disaggregated by category.

**Table 10:** *Beneficiaries of services in social care institutions by category*

<b>Residential Services for the Elderly</b>						
<b>Institution</b>	<b>Year 2020</b>	<b>Year 2021</b>	<b>Year 2022</b>	<b>Year 2023</b>	<b>Year 2024</b>	<b>Year 2025</b>
<b>Tirana Elderly Home</b>	47	43	45	47	49	48
<b>Kavaja Elderly Home</b>	56	58	60	60	62	67
<b>Fier Elderly Home</b>	56	45	48	54	53	60
<b>Polican Multipurpose Centre for the Elderly</b>	37	33	27	42	44	52
<b>Shkodër Elderly Home</b>	63	60	61	63	64	72
<b>Gjirokastër Elderly Home</b>	58	58	60	60	60	72



<b>Kamëz Day Care Multipurpose Centre</b>	28	28	27	28	27	28
<b>Saranda Day Care Centre</b>	50	47	51	52	49	47
<b>Subtotal</b>	395	372	379	406	408	446

Residential Services for Children						
<b>Tirana Infant Home</b>	36	31	30	29	34	35
<b>Tirana School-Age Children's Home</b>	43	39	39	37	36	35
<b>Korçë Children's Home (0–5 years)</b>	19	13	6	3	3	0
<b>Durrës Children's Home (0–5 years)</b>	18	15	18	20	21	19
<b>Shkodër Children's Home (0–5 years)</b>	9	18	17	17	19	18
<b>Shkodër Children's Home (6–15 years)</b>	35	32	21	18	24	28
<b>Saranda Children's Home (6–15 years)</b>	12	20	19	16	11	13

<b>Family-Type Home for Youth (16–18 years), Shkodër</b>	12	20	19	16	11	13
<b>Vlorë Children’s Home (0–5 years)</b>	21	14	10	2	0	0
<b>Subtotal</b>	229	215	187	164	172	168

### Residential Services for Persons with Disabilities

<b>Development Center, Tirana</b>	18	19	20	16	18	23
<b>Development Center, Durrës</b>	33	34	36	38	39	39
<b>Development Center, Shkodër</b>	42	42	42	45	43	43
<b>Development Center, Berat</b>	29	29	29	30	30	20
<b>Development Center, Korçë</b>	36	36	36	36	38	38
<b>Development Center, Vlorë</b>	31	31	30	30	29	29
<b>Day Care Center, Lezhë</b>	30	30	30	33	35	32
<b>Day Care Center, Korçë</b>	17	17	17	18	18	19
<b>Subtotal</b>	236	238	240	246	250	243

Residential Services for Victims of Trafficking						
<b>QKPVT</b>	10	12	19	14	31	15
Residential Services for Victims of Domestic Violence						
<b>QKTVDHF</b>	60	85	51	71	55	24
Emergency Center						
<b>Emergency Centers (number of families)</b>	40	41	40	38	36	44
<b>TOTAL</b>	970	963	916	939	952	940

*Source: State Social Service*

What can be observed is that the data published by the State Social Service on beneficiaries of services provided by social care institutions financed by the state budget do not correspond with the figures reported in the monitoring reports of the Ministry of Health and Social Welfare.

Six Development Centers for persons with disabilities and two-Day Care Centers are financed from the state budget. According to the State Social Service, the number of beneficiaries in the category of people with disabilities is 250, whereas the 2024 monitoring report of the Ministry of Health and Social Welfare reports 207 beneficiaries. According to the latest annual work analysis report, the State Social Service notes that around 50% of the Development Centers financed by the state budget have lost their functional purpose, as beneficiaries are over the age of 21 and, due to their diagnosis, are no longer able to benefit from developmental or life-skills training programs.

As a result, the services provided in these centers are mainly focused on basic daily support services, such as food provision, healthcare services, and cultural activities. Finally, in the implementation of the objectives and measures set out in the National Action Plan for Persons with Disabilities, the Ministry of Health and Social Welfare adopted Law No. 65/2016 “On Social Enterprises.” According to this law, social enterprises contribute to social protection and the support of disadvantaged groups through their employment and the provision of services for them.



In implementation of the law, several secondary acts were adopted, including the approval of the categories of disadvantaged groups through Council of Ministers Decision No. 56/2018, which also includes persons with disabilities. Furthermore, Council of Ministers Decision No. 174, dated 24 March 2023, “On the determination of support schemes through subsidies for social enterprises for the period 2023–2025,” approved the establishment of a support fund for social enterprises recognized as such by the minister responsible for social affairs, with a total value of 240 million ALL for the period 2023–2025.

This fund was planned to be allocated through the state budget in the form of subsidies to social enterprises, with the objective of:

*a) supporting the creation of new jobs through the payment of the minimum wage for employees of social enterprises belonging to disadvantaged groups;*

*b) supporting the payment of mandatory social and health insurance contributions for employees of social enterprises belonging to disadvantaged groups.*

In the budget monitoring reports of the Ministry of Health and Social Welfare for the period 2020–2024 and the Medium-Term Budget Program documents for 2025–2028, the budget product “Persons from disadvantaged groups employed by social enterprises” has been identified, which is related to the implementation of the above-mentioned legal obligations.



**Table 11: Budgetary expenditures of the product “Persons from disadvantaged groups employed by social enterprises”**

Year	Ministry	Budget Program	Product Code	Product Name	Budget Type	Quantity	Budget Expenditure (ALL)
2020	13	Social Care	91307AG	Persons from disadvantaged groups employed by social enterprises	Initial Plan	0	42,000,000
2020	13	Social Care	91307AG	Persons from disadvantaged groups employed by social enterprises	Revised Plan	0	0
2020	13	Social Care	91307AG	Persons from disadvantaged groups employed by social enterprises	Actual	0	0
2021	13	Social Care	91307AG	Persons from disadvantaged groups employed by social enterprises	Initial	250	120,000,000
2021	13	Social Care	91307AG	Persons from disadvantaged groups employed by social enterprises	Revised	0	0
2021	13	Social Care	91307AG	Persons from disadvantaged groups employed by social enterprises	Actual	0	0
2022	13	Social Care	91307AG	Persons from disadvantaged groups employed by social enterprises	Initial	200	120,000,000
2022	13	Social Care	91307AG	Persons from disadvantaged groups employed by social enterprises	Revised	0	0
2022	13	Social Care	91307AG	Persons from disadvantaged groups employed by social enterprises	Actual	0	0
2023	13	Social Care	91307AG	Persons from disadvantaged groups employed by social enterprises	Initial	70	80,000,000
2023	13	Social Care	91307AG	Persons from disadvantaged groups employed by social enterprises	Revised	0	0
2023	13	Social Care	91307AG	Persons from disadvantaged groups employed by social enterprises	Actual	0	0
2024	13	Social Care	91307AG	Persons from disadvantaged groups employed by social enterprises	Initial	60	80,000,000
2024	13	Social Care	91307AG	Persons from disadvantaged groups employed by social enterprises	Revised	60	28,539,856
2024	13	Social Care	91307AG	Persons from disadvantaged groups employed by social enterprises	Actual	21	3,676,903
2025	13	Social Care	91307AG	Persons from disadvantaged groups	Initial	148	80,000,000
2026	13	Social Care	91307AG	Persons from disadvantaged groups employed by social enterprises	Initial	150	80,000,000
2027	13	Social Care	91307AG	Persons from disadvantaged groups employed by social enterprises	Initial	150	50,000,000
2028	13	Social Care	91307AG	Persons from disadvantaged groups employed by social enterprises	Initial	150	80,000,000

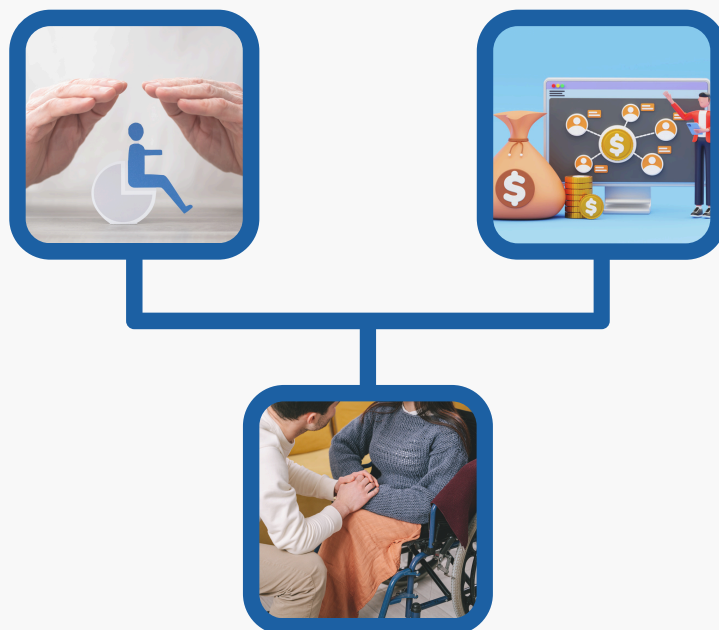
Source: MHSHS 2020-2024 budget monitoring reports and MTBP 2025-2028 documents

As can be observed, the Ministry of Health and Social Welfare initially planned the implementation of this policy in 2020, allocating 42 million ALL to support the employment of persons from disadvantaged groups in social enterprises, but no actual expenditure was recorded. The initial budget planning for the period 2021–2023 also appears ambitious, with 120 million ALL allocated to support the planned employment of 250 persons from disadvantaged groups during 2021–2022, and 80 million ALL planned to support 70 persons in 2023. However, during these years as well, the policy appears not to have been implemented.

The budget monitoring reports do not include analyses of the factors that may have prevented the implementation of this policy. In 2024, the initial budget allocation of 80 million ALL was revised during the year, being reduced to 28.5 million ALL. Despite this downward revision, the actual implementation of the policy remained limited, with only 3.7 million ALL spent, representing approximately 13% of the revised budget. The number of beneficiaries reached 21 out of the 60 initially planned.

Based on the published reports, it is not possible to determine how many beneficiaries from the total belong specifically to the category of people with disabilities, as the disadvantaged groups defined in the legislation include several different categories. The 2024 monitoring report published by the Ministry of Health and Social Welfare only notes that individuals benefiting from the financing of this budget product receive full coverage of mandatory social and health insurance contributions based on the minimum wage in the Republic of Albania. For the period 2025–2028, the budget allocation is projected to remain at an average of around 80 million ALL, while the number of beneficiaries is planned to increase to an average of around 150 persons.

It can be concluded that the implementation of the policy aimed at employing persons from disadvantaged groups through social enterprises began nearly eight years after the adoption of the law, and despite this delay, the results remain minimal both in terms of beneficiaries and financial execution. Furthermore, the Ministry of Health and Social Welfare has not provided detailed analyses on the challenges and achievements related to the implementation of this policy.





## **7. State Budget Expenditures for Persons with Disabilities in the Fields of Education, Employment, and Vocational Training**

In the field of education, Law No. 69/2012 “On the Pre-University Education System in the Republic of Albania,” as amended, provides in its provisions that students from families in need, students with disabilities, and those with learning difficulties are entitled to special support. According to this law, the education of children with disabilities aims at the full development of their intellectual and physical potential and the improvement of their quality of life, in order to prepare them for full inclusion in society and in the labor market. The law establishes inclusion as a fundamental principle, meaning that the placement of children with disabilities in special education institutions is generally intended to be temporary. The inclusion and integration of children with disabilities in mainstream kindergartens and primary schools is considered the primary approach.

With the most recent amendments, the law introduced the transformation of special schools into resource centers, redefining their role not only as institutions functioning during the learning process but also as facilities that can be used beyond regular school activities. The aim of this transformation is to support the education of children with disabilities, continuously improve learning outcomes, and prepare them for full inclusion and independent living. These centers are intended to help children develop the necessary skills in all areas of their daily lives, in accordance with the legislation in force on accessibility and non-discrimination.

To improve learning outcomes, students with disabilities are provided with support teachers and rehabilitation services. Local self-government units also play an important role in the education of children with special needs. According to the law, the relevant basic local self-government unit must ensure appropriate teaching and learning environments for students with disabilities, in accordance with the standards established by the ministry.

To analyze the expenditures incurred from the state budget for persons with disabilities in the field of education, we referred to the budget monitoring reports published by the ministry responsible for education for the period 2019–2024, as well as the Medium-Term Budget Program documents for the period 2025–2028. We found that the data published by the ministry in these reports are partial, unclear, and in some cases contradictory.

Specifically, in the table below we attempted to extract, based on our review of the monitoring reports of the ministry responsible for education, the number of students with disabilities attending resource centers, as well as the total number of students with disabilities enrolled in all public schools. To analyze the policy related to support teachers, we also attempted to identify the number of these teachers from the reports. In some cases, the data are missing from the table because they were not reported and therefore not analyzed in the monitoring reports.



**Table 12:** Statistics on the Number of Students with Disabilities and Support Teachers in Public Schools

Beneficiary Categories	2019	2020	2021	2022	2023	2024
Support teachers in public schools	620	944	1069	Data missing	Data missing	2167
Students with disabilities in Resource Centers	700	614	1350	Data missing	Data missing	160
Total number of registered students with disabilities (mental and physical)	980	3658	3600	Data missing	1200	4600

*Source: Annual budget monitoring reports of the ministry responsible for education, 2019–2024.*

As shown, the number of support teachers has increased over the years, rising from 620 support teachers in 2019 to 2,167 teachers in 2024. In the absence of a separately costed budget product in the monitoring reports of the ministry responsible for education and considering that the average salary of a teacher in 2024 was approximately €950 per month, it is possible to estimate the approximate expenditure from the state budget for support teachers in 2024, which amounts to around 2.34 billion ALL. On the other hand, the ratio of support teachers to students with disabilities has worsened compared to 2019, when there was one support teacher for every 1.5 students, reaching one support teacher for every two students with disabilities in 2024. Regarding the number of students with disabilities receiving services in Resource Centers, the data presented are contradictory in some cases.



Regarding the number of students with disabilities receiving services in Resource Centers, the data presented are contradictory in some cases. However, what stands out is the significant reduction in the number of students in 2024, reaching 160 students. For this category of students, we identified a history of expenditures in the ministry's monitoring reports and in the Medium-Term Budget Program documents for the period 2025–2028, which is presented in the table below.

**Table 13: Expenditures for students with special needs in Resource Centers 2019-2028**

Year	Ministry	Budget Program	Product Code	Product Name	Budget Type	Quantity	Expenditures
2019	Ministry of Education	Basic Education (including preschool)	91103AH	Students with special needs benefiting from educational services	Initial plan	700	94,809,000
2019	Ministry of Education	Basic Education (including preschool)	91103AH	Students with special needs benefiting from educational services	Revised plan	700	94,759,000
2019	Ministry of Education	Basic Education (including preschool)	91103AH	Students with special needs benefiting from educational services	Actual	-	88,321,414
2020	Ministry of Education	Basic Education (including preschool)	91103AH	Students with special needs benefiting from educational services	Initial plan	700	92,057,675
2020	Ministry of Education	Basic Education (including preschool)	91103AH	Students with special needs benefiting from educational services	Revised plan	700	92,057,675
2020	Ministry of Education	Basic Education (including preschool)	91103AH	Students with special needs benefiting from educational services	Actual	614	81,452,565
2021	Ministry of Education	Basic Education (including preschool)	91103AH	Students with special needs benefiting from educational services	Initial plan	1,350	90,024,916
2021	Ministry of Education	Basic Education (including preschool)	91103AH	Students with special needs benefiting from educational services	Revised plan	1,350	88,645,421
2021	Ministry of Education	Basic Education (including preschool)	91103AH	Students with special needs benefiting from educational services	Actual	-	88,362,241
2022	Ministry of Education	Basic Education (including preschool)	91103AH	Students with special needs benefiting from educational services	Initial plan	1,400	97,627,408
2022	Ministry of Education	Basic Education (including preschool)	91103AH	Students with special needs benefiting from educational services	Revised plan	1,400	93,467,552
2022	Ministry of Education	Basic Education (including preschool)	91103AH	Students with special needs benefiting from educational services	Actual	-	93,418,034
2023	Ministry of Education	Basic Education (including preschool)	91103AH	Students with special needs benefiting from educational services	Initial plan	1,200	105,808,778
2023	Ministry of Education	Basic Education (including preschool)	91103AH	Students with special needs benefiting from educational services	Revised plan	1,200	101,750,972
2023	Ministry of Education	Basic Education (including preschool)	91103AH	Students with special needs benefiting from educational services	Actual	-	101,225,353
2024	Ministry of Education	Basic Education (including preschool)	91103AH	Students with special needs benefiting from educational services	Initial plan	160	132,136,000
2024	Ministry of Education	Basic Education (including preschool)	91103AH	Students with special needs benefiting from educational services	Revised plan	160	121,234,128
2024	Ministry of Education	Basic Education (including preschool)	91103AH	Students with special needs benefiting from educational services	Actual	160	121,164,968
2025	Ministry of Education	Basic Education (including preschool)	91103AH	Students with special needs benefiting from educational services	Initial plan	196	239,234,478
2026	Ministry of Education	Basic Education (including preschool)	91103AH	Students with special needs benefiting from educational services	Initial plan	200	239,234,478
2027	Ministry of Education	Basic Education (including preschool)	91103AH	Students with special needs benefiting from educational services	Initial plan	200	239,234,478
2028	Ministry of Education	Basic Education (including preschool)	91103AH	Students with special needs benefiting from educational services	Initial plan	200	239,234,478

*Source: Budget monitoring reports of the ministry responsible for education and the Medium-Term Budget Programme (MTBP) documents 2025–2028*

It is observed that actual expenditures increased from 88.3 million ALL in 2019 to 121.16 million ALL in 2024, while at the same time the number of students declined significantly over the years, from 700 to 160. The monitoring reports do not provide an analysis of the performance of this budget product, which makes it difficult to further assess the impact of Resource Centers' activities on the daily lives of children with disabilities. For the period 2025–2028, the number of students is projected to be around 200, while the corresponding budget allocation is expected to reach 239 million ALL, representing approximately 50% more than the actual expenditure recorded in 2024. The monitoring reports indicate that children with disabilities benefit from financial scholarships in the same way as other children in need and benefit from the policy of free school textbooks.

However, due to the lack of accurate statistics on the number of beneficiaries, it is not possible to estimate how much the state budget spends specifically on this category. Below we present the budget products identified in the monitoring reports and the Medium-Term Budget Program documents, which are related to the above-mentioned policies, to show the total expenditure incurred and planned for these policies over the years.

**Table 14: Expenditures for Children in Need and Students Benefiting from Free School Textbooks (2019–2028)**

Year	Ministry	Budget Program	Product Code	Product Name	Budget	Quantity	Expenditure
2019	Ministry of Education	Basic Education (including preschool)	91103AC	Children in need benefiting from quality educational services	Initial plan	700	94,609,000
2019	Ministry of Education	Basic Education (including preschool)	91103AC	Children in need benefiting from quality educational services	Revised plan	700	55,739,700
2019	Ministry of Education	Basic Education (including preschool)	91103AC	Children in need benefiting from quality educational services	Actual		44,739,580
2019	Ministry of Education	Basic Education (including preschool)	91103AG	Students benefiting from free school textbooks for grades 9+	Initial plan	190,000	585,000,000
2019	Ministry of Education	Basic Education (including preschool)	91103AG	Students benefiting from free school textbooks for grades 9+	Revised plan	190,000	505,000,000
2019	Ministry of Education	Basic Education (including preschool)	91103AG	Students benefiting from free school textbooks for grades 9+	Actual		501,314,982
2020	Ministry of Education	Basic Education (including preschool)	91103AC	Children in need benefiting from quality educational services	Initial plan	700	143,421,800
2020	Ministry of Education	Basic Education (including preschool)	91103AC	Children in need benefiting from quality educational services	Revised plan	700	107,733,381
2020	Ministry of Education	Basic Education (including preschool)	91103AC	Children in need benefiting from quality educational services	Actual	940	81,385,657
2020	Ministry of Education	Basic Education (including preschool)	91103AG	Students benefiting from free school textbooks for grades 9+	Initial plan	198,000	500,000,000
2020	Ministry of Education	Basic Education (including preschool)	91103AG	Students benefiting from free school textbooks for grades 9+	Revised plan	198,000	594,323,513
2020	Ministry of Education	Basic Education (including preschool)	91103AG	Students benefiting from free school textbooks for grades 9+	Actual	231,840	590,045,260
2021	Ministry of Education	Basic Education (including preschool)	91103AC	Children in need benefiting from quality educational services	Initial plan	1,350	153,423,260
2021	Ministry of Education	Basic Education (including preschool)	91103AC	Children in need benefiting from quality educational services	Revised plan	1,350	120,015,388
2021	Ministry of Education	Basic Education (including preschool)	91103AC	Children in need benefiting from quality educational services	Actual		106,651,844
2021	Ministry of Education	Basic Education (including preschool)	91103AG	Students benefiting from free school textbooks for grades 9+	Initial plan	254,000	700,000,000
2021	Ministry of Education	Basic Education (including preschool)	91103AG	Students benefiting from free school textbooks for grades 9+	Revised plan	254,000	666,968,283
2021	Ministry of Education	Basic Education (including preschool)	91103AG	Students benefiting from free school textbooks for grades 9+	Actual		964,547,990
2022	Ministry of Education	Basic Education (including preschool)	91103AC	Children in need benefiting from quality educational services	Initial plan	1,800	210,000,986
2022	Ministry of Education	Basic Education (including preschool)	91103AC	Children in need benefiting from quality educational services	Revised plan	1,800	192,536,182
2022	Ministry of Education	Basic Education (including preschool)	91103AC	Children in need benefiting from quality educational services	Actual		189,542,030
2022	Ministry of Education	Basic Education (including preschool)	91103AG	Students benefiting from free school textbooks for grades 9+	Initial plan	260,000	900,000,000
2022	Ministry of Education	Basic Education (including preschool)	91103AG	Students benefiting from free school textbooks for grades 9+	Revised plan	260,000	799,026,599
2022	Ministry of Education	Basic Education (including preschool)	91103AG	Students benefiting from free school textbooks for grades 9+	Actual		799,411,146
2023	Ministry of Education	Basic Education (including preschool)	91103AC	Children in need benefiting from quality educational services	Initial plan	2,000	233,196,000
2023	Ministry of Education	Basic Education (including preschool)	91103AC	Children in need benefiting from quality educational services	Revised plan	2,000	231,174,010
2023	Ministry of Education	Basic Education (including preschool)	91103AC	Children in need benefiting from quality educational services	Actual		217,321,885
2023	Ministry of Education	Basic Education (including preschool)	91103AG	Students benefiting from free school textbooks for grades 9+	Initial plan	260,000	1,000,000,000
2023	Ministry of Education	Basic Education (including preschool)	91103AG	Students benefiting from free school textbooks for grades 9+	Revised plan	260,000	1,000,000,000
2023	Ministry of Education	Basic Education (including preschool)	91103AG	Students benefiting from free school textbooks for grades 9+	Actual		988,040,249
2024	Ministry of Education	Basic Education (including preschool)	91103AC	Children in need benefiting from quality educational services	Initial plan	4,000	417,600,000
2024	Ministry of Education	Basic Education (including preschool)	91103AC	Children in need benefiting from quality educational services	Revised plan	4,000	310,392,071
2024	Ministry of Education	Basic Education (including preschool)	91103AC	Children in need benefiting from quality educational services	Actual	4,000	283,115,659
2024	Ministry of Education	Basic Education (including preschool)	91103AG	Students benefiting from free school textbooks for grades 9+	Initial plan	252,000	800,000,000
2024	Ministry of Education	Basic Education (including preschool)	91103AG	Students benefiting from free school textbooks for grades 9+	Revised plan	228,833	1,042,365,162
2024	Ministry of Education	Basic Education (including preschool)	91103AG	Students benefiting from free school textbooks for grades 9+	Actual	228,833	1,041,249,179
2025	Ministry of Education	Basic Education (including preschool)	91103AC	Children in need benefiting from quality educational services	Initial plan	4,250	280,000,000
2026	Ministry of Education	Basic Education (including preschool)	91103AC	Children in need benefiting from quality educational services	Initial plan	4,000	270,000,000
2027	Ministry of Education	Basic Education (including preschool)	91103AC	Children in need benefiting from quality educational services	Initial plan	4,550	320,000,000
2028	Ministry of Education	Basic Education (including preschool)	91103AC	Children in need benefiting from quality educational services	Initial plan	4,750	330,000,000
2025	Ministry of Education	Basic Education (including preschool)	91103AG	Students benefiting from free school textbooks for grades 9+	Initial plan	225,000	900,000,000
2026	Ministry of Education	Basic Education (including preschool)	91103AG	Students benefiting from free school textbooks for grades 9+	Initial plan	225,000	900,000,000
2027	Ministry of Education	Basic Education (including preschool)	91103AG	Students benefiting from free school textbooks for grades 9+	Initial plan	220,000	900,000,000
2028	Ministry of Education	Basic Education (including preschool)	91103AG	Students benefiting from free school textbooks for grades 9+	Initial plan	215,000	900,000,000

Source: Budget monitoring reports of the ministry responsible for education and the Medium-Term Budget Program (MTBP) documents 2025–2028.



Finally, from the analysis of expenditures under the higher education budget programme, with the aim of identifying the number of students with disabilities who receive scholarships based on their status and the corresponding funds, we did not find dedicated data for this purpose.

Regarding the support provided by local self-government units for school infrastructure in order to facilitate accessibility, there is no information or analysis in the monitoring reports on the expenditures incurred for this purpose.

Another important objective of the National Action Plan for Persons with Disabilities for the period 2021–2025 is the employment and vocational training of persons with disabilities. The relevant legislation governing employment, as well as the secondary legislation adopted for its implementation, regulates the process of employment and vocational training for people with disabilities in an appropriate manner.

Under Law No. 15/2019 “On the Promotion of Employment,” as amended, employers are required to employ:

*a) one person belonging to the category of persons with disabilities for the first 25 employees of the enterprise; and*

*b) one additional person from the same category for every additional 50 employees of the enterprise beyond the requirement set out in point (a) above.*

If this employment requirement is not fulfilled, the employer must pay a contribution to the Social Employment Fund equal to 100% of the national minimum wage per month for each person with disabilities who should have been employed. The revenues and contributions allocated to the Fund are paid to the institution responsible for employment and skills (AKPA) and constitute a separate budget line within its budget. Any unused funds in the Social Employment Fund during the current year are carried over to the following fiscal year, except for revenues originating from the state budget.

The Social Employment Fund is used to finance programs aimed at employment, self-employment, work rehabilitation, vocational training and retraining, employment guidance and counselling, support services, as well as the reconstruction and adaptation of workplaces for people with disabilities.

From our analysis of the budget monitoring reports of the ministry responsible for employment and vocational training, we were unable to identify any specific budget product or performance indicator dedicated to the employment or vocational training of persons with disabilities within the active labor market programs. As a result, we examined the statistical bulletins and annual work analysis reports published by the National Agency for Employment and Skills (AKPA). The data presented in these reports have been summarized in the tables below.

**Table 15: Statistics on the Number of Registered Unemployed Jobseekers with Disabilities by Education Level and Gender**

I	2019	2020	2021	2022
<b>Registered unemployed</b>	542	604	475	237
<b>Education Level</b>				
Basic education	49%	46%	49.80%	74.50%
Secondary education	31%	33%	30.70%	14.50%
Higher education	6%	6%	6.20%	5.50%
<b>Employed persons from the</b>	82	49	32	18
Female	21	19	10	1
Male	61	30	22	17

*Source: AKPA Statistical Bulletins 2019–2022*

As can be observed from the published data, the number of registered unemployed jobseekers with disabilities at employment offices has declined, reaching 237 in 2022, nearly 50% fewer than those registered in 2019. The educational level of unemployed jobseekers with disabilities who approach employment offices to obtain job offers is predominantly basic education, which represents on average around 55% of the total over the analysis period.

Approximately 6% of people with disabilities registered as unemployed jobseekers have higher education, while around 30% have at least general secondary or vocational education. Regarding gender, men prevail over women among both registered and employed persons with disabilities. What is particularly notable is that the number of persons with disabilities who have been employed compared to the total number registered from this category is very low, showing a declining trend from 82 employed persons in 2019 to only 18 in 2022. This trend indicates that the policies implemented to promote the employment of this category have not produced the expected results. Regarding the distribution by types of employment promotion programs financed by the state budget, the table below presents, in comparative terms, the total number of beneficiaries, the number of beneficiaries with disabilities, and the total budget funds spent for each employment promotion program. Given that financial expenditures are not disaggregated by beneficiary categories, we have proportionally estimated the funds allocated from the state budget during the period 2019–2022 to support the employment of persons with disabilities.

**Table 16: Jobseekers Benefiting from employment promotion programs and budget funds spent**

Employment Promotion Programs	2019			2020			2021			2022			2023		
	Total	People with Disabilities category	Funds spent (ALL)	Total	People with Disabilities category	Funds spent (ALL)	Total	People with Disabilities category	Funds spent (ALL)	Total	People with Disabilities category	Funds spent (ALL)	Total	People with Disabilities category	Funds spent (ALL)
DCM No.1170 Program I (Employment Promotion Program)	26	1	3,228,919	341	4	510,363	484	28	5,115,488	523	31	43,881,595	465	56	61,000
DCM No.17 Program II (Employment Subsidy Program)	1143	60	101,961,788	273	0	2,211,996	417	1	53,762,699	338	1	35,366,947	183	0	16,300,000
DCM No.17 Program III (Professional Practice Program)	1282	1	18,825,400	491	7	1,279,678	1086	15	66,826,269	929	9	59,201,905	633	4	37,000
DCM No.66 Program IV (Internship Program)	0	0	10,000	30	2	506,285	282	2	19,795,706	20	0	1,796,204	0	0	0
DCM No.608 Program V (6-month Program)	20	0	2,560,425	1129	1	25,841,493	1496	7	1,393,026	515	2	69,152,176	51	0	2,880,000
DCM No.609 Program VI (12-month Program)	58	0	1,156,888	536	1	7,299,237	816	3	36,475,464	466	0	35,482,789	133	0	2,650,000
DCM No.348 Program VII (Self-employment Program)	1378	12	49,912,404	717	5	90,744,963	208	0	11,279,351	1267	4	14,587,223	393	0	54,500
DCM No.348 Program VIII (Self-employment Program)	1430	37	21,766,031	602	37	11,854,181	45	1	206,424	286	1	58,789,063	235	0	59,100,000
<b>Total</b>	<b>5537</b>	<b>111</b>	<b>374,734,665</b>	<b>4119</b>	<b>67</b>	<b>70431549</b>	<b>4834</b>	<b>57</b>	<b>386138028</b>	<b>4344</b>	<b>48</b>	<b>448193983</b>	<b>2633</b>	<b>40</b>	<b>448,300,000</b>

Source: AKPA Statistical Bulletins 2019–2023.

Jobseekers with disabilities who have been employed have primarily benefited from Employment Program I, the Work Practice Program (Program III), and the Self-Employment Program. It is observed that the number of beneficiaries with disabilities participating in employment promotion programs has declined, decreasing from 111 beneficiaries in 2019 to only 40 beneficiaries in 2023. The budget funds allocated for this category and their share in relation to the total are presented in the table below.

**Table 17: Funds spent from the state budget for the category of persons with disabilities**

Beneficiaries from employment promotion program	2019	2020	2021	2022	2023
	Funds spent on the PWD category	PWD beneficiaries from employment promotion programs	PWD beneficiaries from employment promotion programs	PWD beneficiaries from employment promotion programs	PWD beneficiaries from employment promotion programs
DCM No. 17 (Program 1 Employment)	124,189	20,953	2,959,373	2,601,012	5,475,556
DCM No. 17 (Program 2 Training through work)	5,352,324	0	128,927	104,636	0
DCM No. 17 (Program 3 Work practice)	143,390	18,244	923,015	573,539	237,599
DCM No. 608 (Program 4 Monthly program)	0	40,418	140,391	0	0
DCM No. 608 (Program 5 – 6-month program)	0	23,367	651,817	268,552	0
DCM No. 608 (Program VI – 12-month program / Informality)	0	1,479	134,098	0	0
DCM No. 535 (Community Work)	432,953	186,783	0	456,348	0
DCM No. 348 (Self-employment Program)	563,177	728,579	458,317	205,570	0
<b>TOTAL</b>	<b>6,616,032</b>	<b>1,019,823</b>	<b>5,395,938</b>	<b>4,209,658</b>	<b>5,713,154</b>
<b>Share of total</b>	<b>2%</b>	<b>1%</b>	<b>1%</b>	<b>1%</b>	<b>1%</b>

Source: AKPA Statistical Bulletins 2019-2023

As observed from the calculations made, the funds spent from the state budget for the category of persons with disabilities (PWD) in the field of employment promotion account for only 1% of the total funds spent on this policy. This trend remains stable over the years, indicating that employment promotion policies have had limited impact on improving the living conditions of persons with disabilities in Albania.



**Table 18: Jobseekers benefiting from vocational training program**

Vocational Training Programs	2019			2020			2021			2022		
	Total	PWD category	Funds spent from the state budget	Total	PWD category	Funds spent from the state budget	Total	PWD category	Funds spent from the state budget	Total	PWD category	Funds spent from the state budget
Unemployed jobseekers benefiting from free training courses	8,714	110	280,000,000	5,532	56	282,000,000	6,631	95	295,000,000	9,398	83	331,000,000
Funds spent from the state budget for the PWD category			3,334,342			2,854,664			4,226,361			2,923,282

*Source: AKPA Statistical Bulletins 2019-2023*

Regarding unemployed jobseekers benefiting from vocational training programs, reports published by AKPA state that persons belonging to the category of persons with disabilities benefit from free vocational training courses. The number of beneficiaries under this program has also declined over the years, decreasing from 110 beneficiaries in 2019 to 83 beneficiaries in 2022. The funds allocated from the state budget for these programs and their utilization are reported by AKPA in aggregate form, without disaggregation by beneficiary categories. As a result, we have estimated the share allocated to persons with disabilities proportionally, based on the number of beneficiaries. The allocated funds again appear limited compared to the total, accounting on average for around 1% of the total funding.

Finally, regarding the implementation of the obligations established by the Law on the Promotion of Employment concerning the employment of persons with disabilities or the payment of contributions equivalent to the minimum wage to the Social Employment Fund, we found that reporting on its establishment and operationalization was only mentioned in AKPA’s 2023 annual work analysis, approximately four years after the adoption of the law. In the medium-term budget documents and the budget monitoring reports of the ministry responsible for employment, no information is reported on the implementation of the legal obligations, the establishment of the fund, or the activities carried out through it. Apart from the drafting of secondary legislation implementing the law, there is a complete lack of information regarding the amount of funds created and how it is used to achieve the objectives of the law.

In the 2023 analysis, AKPA refers to measures undertaken, such as meetings organized with several categories of businesses for this purpose and the establishment of a system for registering jobseekers with disabilities, which reportedly amounts to around 8,000 registered individuals. However, the report does not provide information on the practical implementation of this policy by businesses or the public administration.

The lack of transparency raises concerns regarding the implementation of the law and the achievement of the objectives set out in the Action Plan for Persons with Disabilities for the period 2021–2025.



## 8. State Budget Expenditures for Persons with Disabilities in the Area of Accessibility in Public Infrastructure and Road Transport

Accessibility in public infrastructure and road transport remains one of the most important objectives of the Action Plan for Persons with Disabilities for the period 2021–2025. According to the Action Plan, the objectives and the budget planned for their implementation amount to a total of 289.5 million ALL for the period 2021–2025, representing approximately 19% of the total cost of the Action Plan.

**Table 19: Objective 1 and Its Costmin Anglisht**

Objective 1	2021	2022	2023	2024	2025	2025
1.1 Ensuring accessibility of the environment for persons with disabilities	3,858,608	18,529,984	16,479,128	16,998,728	20,251,704	76,118,152
1.2 Ensuring accessibility in transport for persons with disabilities	8,445,300	8,445,300	20,728,900	20,668,260	18,301,540	108,412,708
1.3 Ensuring accessibility to information and communication for persons with disabilities	14,947,232	29,175,500	15,209,768	9,271,344	36,340,500	104,944,344
Total	27,251,140	27,251,140	52,417,796	46,938,332	74,893,744	289,475,204

*Source: PWD Action Plan 2021-2025*

To assess the achievement of the objectives related to this area, we reviewed the monitoring reports of the ministry responsible for transport to identify whether their medium-term budgets include specific products or performance indicators aimed at measuring concrete results in the implementation of the measures and activities foreseen in the Action Plan. The information presented in these reports does not contain financial or non-financial data regarding accessibility in the field of road transport for people with disabilities (PWD). Furthermore, the ministry responsible for infrastructure did not respond to our request for information on this issue.

Meanwhile, the Supreme State Audit has conducted a performance audit titled “Final Performance Audit Report: Accessibility for Persons with Disabilities.” The report concludes as follows: “Although the legal and strategic framework in Albania recognizes the right of persons with disabilities (PWD) to accessibility and independent living, in practice adequate conditions for the realization of this right have not yet been established. The audit showed that the implementation of the measures of the National Action Plan for Persons with Disabilities 2021–2025 has been partial and fragmented.

The Ministry of Health and Social Welfare (MHSP), the Ministry of Infrastructure and Energy (MIE), and the municipalities of Shkodër, Durrës, and Pogradec have not ensured sustainable and functional cooperation in this regard. The situation is particularly problematic in the areas of public road transport and infrastructure.



The audited municipalities have not approved specific accessibility plans, have not carried out systematic monitoring of existing conditions, and have not implemented accessibility criteria in the design and inspection of new constructions.

The current legal framework does not define the minimum level of accessibility guaranteed in public road transport. Moreover, national legislation is not aligned with European Union standards in the field of accessible transport. In the absence of structured interventions, functional cooperation mechanisms, and sustained technical and financial support, persons with disabilities continue to face serious barriers to access and equal participation in public life, preventing them from living independently and with dignity.”<sup>22</sup>

Meanwhile, regarding accessibility of information and in line with the provisions of the Action Plan, we addressed AKSHI (National Agency for Information Society) requesting information on the measures taken to adapt all public-facing systems to ensure accessibility for persons with disabilities (PWD), as no detailed information on this matter was identified in the medium-term budget planning documents or in the monitoring reports. AKSHI informed us as follows:

“In the framework of the project ‘Improving Equal Access to High-Standard Public Services through the GOVTECH Operation’ (<https://akshi.gov.al/programi-govtech/>), which is part of our commitments to improve and digitalize public services, significant investments have been planned to ensure that persons with disabilities can easily and without barriers use the e-Albania platform. This project, which is still ongoing, aims to integrate international accessibility standards so that all citizens, regardless of any physical limitations or other abilities, can benefit from equal and efficient services. We would like to inform you that very soon, through e-Albania 2.0, services that are easily accessible to persons with disabilities will be made available. Currently, the virtual assistant Diella provides real-time assistance through voice and visual support for any questions users may have regarding the services of the portal.

Additionally, AKSHI informed us that it has finalized the draft decision titled: “On the Accessibility of Websites and Mobile Applications of Public Sector Bodies”. This decision has been partially aligned with Directive (EU) 2016/2102 of the European Parliament and of the Council of 26 October 2016, “on the accessibility of the websites and mobile applications of public sector bodies.” The draft decision foresees the adoption of WCAG 2.0 standards, which establish rules to ensure accessibility of websites and mobile applications for people with disabilities across the entire public sector. The adoption of this draft decision is expected within 2026.

[22] Supreme State Audit, Performance Audit Report “Accessibility for Persons with Disabilities”, page 15, <https://www.klsh.org.al/wp-content/uploads/2025/11/Raport-Aksesueshmeria-PAK-web.pdf>



## 9. State budget expenditures for PWD in the field of access to justice

The provision of free legal aid in Albania is regulated based on Law No. 111/2017 “On State-Guaranteed Legal Aid”, which recognizes persons with disabilities (PWD) as a priority category for receiving primary and secondary legal aid. The legislation is further complemented by the document of the National Disability Strategy 2021–2025, which emphasizes the necessity of access to justice without barriers. According to the National Action Plan for Persons with Disabilities 2021–2025, Policy Objective 2 “Ensuring equal access to the justice system for all persons with disabilities” is one of the important measures to be implemented with a total planned budget of 204 million ALL for the period, or about 14.6% of the total cost of the action plan. Under this objective, two important specific objectives have been defined which relate to increasing the number of individuals with disabilities who use free legal aid services as well as ensuring equal recognition before the law for persons with disabilities, particularly persons with intellectual disabilities.

To trace financial data related to the implementation of this objective and its specific objectives, we referred to the monitoring reports of the Ministry of Justice, where the activities of the Free Legal Aid Directorate are budgeted under the “Legal Aid” Budget Program. The Free Legal Aid Directorate, as the institution responsible for administering the free legal aid system, based on Article 8 of Law No. 111/2017 “On State-Guaranteed Legal Aid”, in the implementation of its functional duties collects and analyzes information on the provision of legal aid to improve the functioning of the free legal aid delivery system. Below we present the budget spent and planned for the “Legal Aid” program during the period 2019–2028.

**Table 20:** *Budget spent and planned for the period 2019–2028 for Legal Aid*

Budget in million ALL for years	Factual 2019	Factual 2020	Factual 2021	Factual 2022	Factual 2023	Factual 2024	Budget 2025	Budget 2026	Budget 2027	Budget 2028
Budget of the “Legal Aid” Program	16.3	17.2	29.7	36.8	51.2	66.9	103.5	132.5	132.7	133.1
Budget of the Ministry of Justice	10 732.7	8550.6	7951.9	8328.4	11053.0	13930.3	14930.3	14963.8	14925.9	15148.9
Share in percentage	0.15%	0.20%	0.37%	0.44%	0.46%	0.48%	0.69%	0.89%	0.89%	0.88%

*Source: Ministry of Justice Monitoring Reports and Medium-Term Budget Documents 2025-2028*



As can be seen from the table above, the budget of the Legal Aid budget program has increased almost fourfold from 2019 to 2024. The program budget for the period 2025–2028 is also planned to increase, which demonstrates the commitment to strengthening this function. Increased funding translates into the opening of more legal aid centers, bringing the service closer to individuals. For the category of persons with disabilities (PWD), who benefit from free legal aid, this means lower transportation costs, greater opportunities for free legal counselling, and increased access to court representation and the handling of administrative procedures. Despite this, in these reports we did not find financial data disaggregated for the category of persons with disabilities (PWD), either in terms of beneficiaries or financial allocations, which would allow for a more detailed analysis of how the support for this category from the state budget has evolved. According to the written information provided by the Ministry of Justice, for the period 2019–2025, a total of 2,337 persons with disabilities benefited from primary legal aid, while 1,034 persons with disabilities benefited from secondary legal aid during this period.

Regarding the equal recognition before the law of persons with disabilities, particularly persons with intellectual disabilities, apart from the drafting and adoption of primary legislation, such as the Law on Protection from Discrimination, the Law on the Inclusion and Accessibility of Persons with Disabilities, the Law on Mental Health, the provisions in the Civil and Criminal Codes related to legal capacity, and electoral rules that guarantee political participation, no specific data were found in the monitoring reports of ministries and central institutions or in the medium-term budget documents regarding the measures taken and the funds spent for this purpose. In conclusion, free legal aid is a powerful mechanism that significantly improves the lives of persons with disabilities in Albania. It increases access to justice, helps secure social and economic rights, reduces discrimination, and strengthens social inclusion. However, to be fully effective, it requires expanded institutional capacities, better information and awareness among persons belonging to this category about the benefits available to them, as well as strengthened and continuous institutional support through adequate human and financial resources to ensure that this service is delivered in the most inclusive manner possible.

Regarding equal recognition before the law for persons with disabilities (PWD), although important steps have been taken toward the development of legislation, a deeper reform of legal capacity is still needed. This includes the introduction of supported decision-making instead of full representation, greater access to justice and free legal aid, and the harmonization of legislation in key areas such as mental health, elections, and anti-discrimination. It also requires comprehensive training of professionals, stronger institutional protection mechanisms, the availability of accurate data, as well as increased accessibility and the active participation of persons with disabilities in policymaking.<sup>23</sup>

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[23] Referoju bibliografisë më poshtë për referencat e rekomandimeve.

# ANNEXES

## LEGAL FRAMEWORK CONTEXT & ANALYSIS





The following list provides for the main legal and regulatory documents subject of legal research. The following list is not exhaustive. Laws, by-laws or sectoral strategies might be subject to further legal scrutiny and assessment only if related issues concerning the objective of the project arise during the interviews stage with stakeholders.

## 1. CONVENTIONS AND CONSTITUTION OF ALBANIA

- [United Nations 2006 Convention on the Rights of Persons with Disabilities \(CRPD\)](#)<sup>25</sup>

The CRPD was ratified by the Republic of Albania through law no. 108/2012 on 15 November 2012 and serves as a fundamental international human rights treaty designed to promote, protect, and guarantee the full and equal enjoyment of all human rights for persons with disabilities. It provides a rights-based framework aimed at eliminating discrimination and fostering inclusion and equality.

Its key principles include: (i) Respect for inherent dignity, individual autonomy, and independence; (ii) Non-discrimination; (iii) Full and effective participation and inclusion in society; (iv) Respect for difference and acceptance of persons with disabilities as part of human diversity; (v) Equality of opportunity and accessibility; (vi) Equality between men and women; (vii) Respect for the evolving capacities of children with disabilities. According to the Convention state parties (including Albania) have several obligations towards the persons with disabilities, including but not limited to the following:

- Promote and protect rights of persons with disabilities in all spheres of life.
- Ensure accessibility to the physical, social, economic, and cultural environment, including information and communication.
- Guarantee equal access to education, employment, health care, and justice.
- Prevent exploitation, violence, and abuse, particularly of women and children with disabilities.
- Support independent living and inclusion in the community.
- Promote participation in political and public life.

[25] <https://www.un.org/disabilities/documents/convention/convoptprot-e.pdf>

[26] <https://qbz.gov.al/preview/635d44bd-96ee-4bc5-8d93-d928cf6f2abd>



The CRPD emphasizes an intersectional approach, acknowledging that persons with disabilities may face multiple forms of disadvantage due to age, gender, ethnicity, or socioeconomic status. However, to mitigate such risks, the CRPD streamlines several obligations.

In our analysis (Table 1) there is a full alignment among its main principles and constitutional rights embedded in the Constitution of Albania. The following principles shall serve as the baseline for the monitoring of rights of persons with disabilities and their level of implementation at the domestic legislation.

**Tabela 21:** *Përputhja e parimeve të Konventës me të drejtat kushtetuese në Shqipëri*

CRPD Article	Key Obligation	Correlation with Albanian Constitution Principles
Article 5 – Equality and Non-Discrimination	Prohibit all forms of discrimination based on disability; ensure equal and effective legal protection in all situations.	Aligns with Article 18 of the Constitution, which guarantees equality before the law and prohibits discrimination. Ensures that persons with disabilities enjoy the same legal protections and rights as others.
Article 9 – Removing Barriers (Accessibility)	Enable independent living and full participation by removing physical, informational, communication, and service barriers.	Correlates with the principle of human dignity and equality (preamble and Articles 3 and 18), emphasizing the right to access public services, education, and housing. Accessibility supports full societal participation, a constitutional aim.
Article 13 – Enabling Justice	Ensure equal and effective access to justice, with procedural accommodations, allowing full participation in legal processes.	Connects with Article 42 (Right to a fair trial), ensuring persons with disabilities can exercise their judicial rights fully and effectively, safeguarding access to courts and legal procedures.

Article 27 – Work and Employment	Guarantee equal employment opportunities in inclusive environments and protection of employment rights.	Supports Article 49 (Right to work and social protection) by promoting the integration of persons with disabilities in the labor market and protecting their employment rights.
Article 29 – Participation in Political and Public Life	Ensure full participation in political life, including voting and being elected.	Correlates with Article 45 (Right to vote and participate in political life), ensuring persons with disabilities have equal political rights and opportunities.

All these CRPD articles reflect and reinforce key Albanian constitutional principles: equality, non-discrimination, human dignity, access to justice, labor rights, and political participation. Essentially, the CRPD provides detailed guidance on implementing these constitutional guarantees specifically for persons with disabilities, ensuring their full inclusion in society. Finally, by rectifying the CRPD, Albania has committed to consult and actively involve persons with disabilities in policymaking and implementation. This means that their inclusion in the prior consultation should not be formal but substantial and it is not limited to the drafting and approval of the laws, but also to their by-laws.

- EU Union of Equality – Strategy for the Rights of Persons with Disabilities 2021–2030<sup>27</sup> and United Nations 2030 Agenda for Sustainable Development<sup>28</sup>.

Adopted by the European Commission in March 2021, this ten-year strategy aims to strengthen the rights, inclusion, and participation of persons with disabilities in Europe and beyond.

The strategy contains an ambitious set of actions and flagship initiatives in various domains and has numerous priorities, such as:

- (i) accessibility:** being able to move and reside freely but also to participate in the democratic process;
- (ii) having a decent quality of life and to live independently:** it focuses notably on the de-institutionalisation process, social protection and non-discrimination at work;
- (iii) equal participation:** it aims to effectively protect persons with disabilities from any form of discrimination and violence;
- (iv) ensure equal opportunities:** in and access to justice, education, culture, sport and tourism, but also equal access to all health services.

[27] Union of equality – Strategy for the rights of persons with disabilities 2021-2030, Publications Office, 2021, <https://data.europa.eu/doi/10.2767/31633>

[28] <https://sdgs.un.org/2030agenda>



The Strategy is addressing multiple and overlapping forms of disadvantage affecting women, children, older persons, refugees, and people in socioeconomic hardship, in line with the UN 2030 Agenda for Sustainable Development and the Sustainable Development Goals (SDGs).

The 2030 Agenda for Sustainable Development—adopted by all UN Member States in 2015 commits to “leave no one behind”, explicitly including persons with disabilities. The 2030 Agenda integrates disability inclusion as essential to sustainable development, human rights, and social justice.

It recognizes disability as a cross-cutting issue that must be addressed in all efforts to achieve the 17 Sustainable Development Goals (SDGs).

Key points related to disability rights include:

- (i) Inclusion and equality:** Ensuring full and equal participation of persons with disabilities in education, employment, and society (SDGs 4, 8, 10, and 16);
- (ii) Accessibility:** Promoting access to physical environments, transportation, information, and technology;
- (iii) Data and monitoring:** Calling for disaggregated data to track progress for disabled people.

For Albania as a candidate country for EU membership and a UN member, these frameworks influence how its national legislation and policy should be shaped. The EU Strategy means Albania’s legislation on persons with disabilities should incorporate rights-based, equality-oriented provisions, not just welfare. It must ensure accessibility, independent living, full participation, non-discrimination, employment, education, justice access. The UN 2030 Agenda means Albania’s legislation must treat inclusion of persons with disabilities as part of broader sustainable development: reducing inequalities, inclusive cities, enabling participation, strengthening social protection. Albania has already begun aligning it has national action plans, some legal protections. But the frameworks push for deeper reforms: accessibility laws/regulations, stronger monitoring/outcome data, elimination of institutionalisation where possible, inclusive employment measures, mainstreaming disability rights in all policies. The domestic legislation for persons with disabilities in Albania reflects to a good level both the normative standards (CRPD, EU Strategy) and the developmental perspective (SDGs). However, certain rights are only partially implemented, such as those concerning the ensuring that physical/digital environments are accessible, ensuring that they are included in the labour market and social life, and ensuring that poverty and exclusion are properly addressed.



## 2. DOMESTIC LEGISLATION

- Policy Document “Disability Assessment Reform in the Social Protection System and Action Plan, 2019–2024”<sup>28</sup>.

The purpose of the Policy Document is to reform the way disability (“ability limitation”) is assessed in Albania’s social protection system, shifting from a purely medical approach to a biopsychosocial model of disability. The reform aims to deliver a more fair, inclusive and rights, based system of disability assessment, one that recognises not only medical impairment, but also how impairments interact with personal, social and environmental factors to affect participation in society. The premises on which the Policy Document was prepared were based on the identified challenges:

-The previous assessment system being largely medically based, without sufficient attention to the social, environmental and participatory aspects of disability.

-Gaps in legislative and regulatory frameworks, institutional fragmentation, lack of standardised criteria and procedures across regions.

-The need to ensure that the reform is budgeted, sustainable, and reaches all geographic regions.

The document lists specific objectives such as:

- (i) Establishing objective criteria and procedures for assessment of disability;**
- (ii) Ensuring equal access to benefits and support services for persons with disabilities, based on the new assessment model.;**
- (iii) Improving institutional capacities** (commissions, registries, data systems) and strengthening coordination among ministries and local government.

[28] Vendimi i Këshillit të Ministrave nr. 380, datë 05.06.2019 – i bazuar në kornizat ndërkombëtare të referencës (klasifikimi i Organizatës Botërore të Shëndetësisë dhe koncepti i pjesëmarrjes dhe mjedisit) dhe i përputhur me politikat strategjike të Shqipërisë për mbrojtjen sociale dhe përfshirjen e personave me aftësi të kufizuara.



While the reform piloted in some districts initially (Tirana, Durrës and Elbasan), the plan envisioned expansion to all districts by 2024. The baseline for its level of implementation into practice should be the following criteria:

- The increasing the capacity: Training of multidisciplinary commission members (medical, social, psychological, rehabilitation) and establishment of standard protocols.
- Monitoring & evaluation: Use of defined indicators, data systems, and periodic review of whether the new model achieves improved inclusion and fairness.
- Communication & stakeholder engagement: Informing persons with disabilities, service providers, municipalities and NGOs about the new system; gathering feedback and adjusting processes based on experience.
  - Linkage with broader services: The assessment reform should feed into integrated services — accessible transport, inclusive education, employment supports — so that assessment leads to real inclusion, not just benefit eligibility.

- [The National Plan for Individuals with Disabilities 2021-2025<sup>29</sup>](#).

The Plan sets out key objectives across several policy areas, including:

**-Legal and institutional framework:** strengthening legislation and coordination mechanisms to ensure compliance with international standards on disability rights.

**-Accessibility and participation:** improving access to education, employment, healthcare, social protection, and justice for persons with disabilities.

**-Awareness and empowerment:** promoting societal inclusion, combating stigma, and supporting independent living through community-based services.

**-Data and monitoring:** establishing systems to collect reliable data, monitor implementation, and evaluate progress toward inclusion targets.

From a legal analysis perspective, the Plan emphasizes the alignment of national law with the CRPD and the need for stronger enforcement mechanisms. It highlights gaps in current implementation—particularly in accessibility, employment equality, and inclusive education—and calls for legislative amendments and administrative reforms to ensure full realization of disability rights. Overall, the document represents a commitment by the Albanian state to advance human rights, social justice, and non-discrimination for persons with disabilities through a coordinated, cross-sectoral approach.

[29] CoM Decision no. 276, date 12.05.2021, <http://qbz.gov.al/eli/vendim/2021/05/12/276>



- [The National Strategy for Social Protection 2024-2030 and the Action Plan for Its Implementation](#)<sup>31</sup>.

It provides a framework for strengthening Albania's social protection system, ensuring social inclusion, and safeguarding the rights of vulnerable groups.

Its key legal aspects can be summarized as the following:

**(i) Legislative Alignment and Reform:** The Strategy identifies gaps in the current legal framework governing social protection, including issues related to eligibility, benefits, and administrative procedures.

**(ii) Rights-Based Approach:** Emphasizes social protection as a fundamental human right, guaranteeing access to benefits and services for the elderly, persons with disabilities, children, and marginalized groups.

**(iii) Implementation and Enforcement Mechanisms:** The Action Plan provides concrete legal and administrative measures to operationalize the Strategy, including monitoring frameworks, reporting obligations, and inter-institutional coordination. It calls for mechanisms to ensure accountability, transparency, and access to remedies for individuals whose rights under the social protection system are not fully respected.

**(iv) Data Protection and Administrative Law Compliance:** Legal provisions in the Plan address the protection of personal data and confidentiality in social protection programs.

The Strategy and Action Plan constitute a roadmap for harmonizing Albania's social protection system with international legal obligations and domestic constitutional guarantees. Their successful implementation requires both legislative reforms and effective regulatory oversight, ensuring that social protection rights are enforceable, equitable, and consistent with the rule of law.

- [Law no. 93/2014, dated 24.7.2014, "On the Inclusion and Accessibility of Individuals with Disabilities"](#)<sup>31</sup>.

According to the law the inclusion and accessibility are translated into the practice through:

**(i) Barrier removal:** The law mandates actions for eliminating architectural, infrastructural, communication and information obstacles in public and private entities providing services.

[31] Vendimi i Këshillit të Ministrave nr. 152, datë 13.03.2024 <http://qbz.gov.al/eli/vendim/2024/03/13/152>

[32] <http://qbz.gov.al/eli/ligj/2014/07/24/93>



**(ii) Access to services:** Persons with disabilities must have access to education, health, rehabilitation, social services, transport, housing, employment, culture, sports and leisure.

**(iii) Support services:** The law provides for personal assistance and other support to enable independent living.

**(iv) Employment obligations:** Employers (especially larger ones) have specific obligations to employ persons with disabilities and adapt working conditions; non-compliance may be discrimination.

**(v) Information and communication:** Public services must provide information in accessible formats, including sign-language and other supports for persons with sensory impairments.

**(vi) Data collection & planning:** The law calls for collection of data concerning disabilities, needs assessments, and national planning (action plans) for persons with disabilities.

The institutional framework under law no.93/2014 establishes a multi-level governance structure to ensure the inclusion and accessibility of persons with disabilities.

At the central level, the responsible ministry for social protection and disability coordinates policy, monitors implementation, and allocates budgets for barrier removal and support services. Local governments, including municipalities, are tasked with ensuring accessibility within local infrastructure and public services in cooperation with central authorities.

A National Council for Persons with Disabilities, functions as a consultative body, involving organizations representing persons with disabilities to advise, monitor, and evaluate relevant policies. The law further provides for inspection, compliance monitoring, and enforcement mechanisms, including sanctions and remedies for failures to fulfil legal obligations.

Law provides a comprehensive legislative framework to ensure that persons with disabilities in Albania enjoy equal rights, full participation, and accessibility in all areas of life. It reflects international standards (CRPD) and mandates concrete state obligations (removal of barriers, support services, accessible information and infrastructure). However, as with many laws in this area, the key challenge remains implementation – ensuring budgets, capacity, monitoring and enforcement mechanisms are in place so that the rights on paper lead to tangible improvements in people's lives.



- **The law is supplemented by secondary legislation as below:**

• **CoM** decision no. 1074/2015 “On Defining Measures for Elimination of Communication and Infrastructure Barriers for the Provision of Public Services to Persons with Disabilities”<sup>32</sup>.

This Decision establishes the legal and institutional framework for ensuring equal access of persons with disabilities to public services in Albania by removing physical, communication, and informational barriers. It obliges all public institutions, at both central and local levels, to take specific measures to adapt their infrastructure, facilities, and communication systems to the needs of persons with disabilities<sup>33</sup>.

These include:

- Ensuring accessibility to public buildings, service counters, and information points.
- Adapting communication methods, such as providing information in accessible formats (Braille, large print, audio, or sign language).
- Implementing assistive technologies to facilitate interaction with public services.
- Training staff to provide appropriate assistance and respectful communication with persons with disabilities.

However, the following considerations should be made regarding the challenges of implementation into the practice that can improve accessibility:

- Physical accessibility remains very poor in practice: many public buildings, sidewalks, transport, institutions lack basic accessible infrastructure (ramps, elevators, tactile paths)<sup>34</sup>.
- Local authorities often lack expertise of their obligations under CoM decision.
- Accessible formats (sign language, Braille, simplified reading, audio) are often missing in public institutions’ communication as well as in products and services offered by private companies (e.g. electronic communications).

[32] <http://qbz.gov.al/eli/vendim/2015/12/23/1074>

[33] Lista e institucioneve në nivel qendror dhe vendor përfshin, por nuk kufizohet vetëm tek institucionet e mëposhtme: ministrinë, bashkitë, operatorët e transportit publik dhe privat, Komisioni Qendror i Zgjedhjeve, media dhe Televizioni Kombëtar, etj..

[34] <https://acqj.al/en/te-drejtat-kundrejt-realitetit-sfidat-e-personave-me-aftesi-te-kufizuara>.



- **Law no. 57/2019 “On Social Assistance in the Republic of Albania” (amended by Law No. 79/2023, dated 12.10.2023)<sup>35</sup>.**

It establishes a framework for providing financial and social support to vulnerable groups, including persons with disabilities.

It ensures that these persons and their families are prioritized within the social protection system, granting them access to economic assistance and social services based on objective assessments of their income and living conditions.

The law considers the additional costs associated with disability when determining eligibility, aiming to promote fairness and inclusion.

For persons with disabilities, the law provides specific forms of categorical assistance, offering regular financial support to individuals with permanent or severe disabilities and to families raising children with disabilities. Beyond financial aid, it emphasizes access to rehabilitation, home care, and community-based services, delivered through local government structures.

Article 4 paragraph (y) provides for the definition of the “biopsychosocial assessment” as a process that evaluates various interrelated factors which determine an individual’s ability to carry out daily life activities and to participate in society on an equal basis with others. These factors include bodily structure, physical and psychological functions, as well as personal, social, economic, and cultural factors. In a comparative legal analysis with international frameworks, this definition reflects the internationally recognized biopsychosocial model of disability, consistent with both WHO’s ICF<sup>36</sup> and the UN CRPD frameworks. It represents a holistic understanding of disability that integrates medical, psychological, and social dimensions. The biopsychosocial assessment of disability in Albania is implemented through local self-government units with the involvement of several key institutions: the Regional Directorates of the State Social Service, which manage applications, conduct multidisciplinary evaluations, and issue official decisions on disability status; the mayors of municipalities, who handle the financial procedures for disability payments; and the Council of Ministers, which defines the overall criteria, procedures, documentation, and responsibilities for disability assessments and related support services. All data are managed through the National Electronic Registry to ensure standardized and coordinated implementation<sup>37</sup>. This institutional framework follows internationally recognized practices: multidisciplinary evaluation, local delivery, national standards, and digital coordination, while maintaining alignment with the CRPD’s focus on participation and equal access. However, in some countries (e.g. Italy), there is increasing emphasis on independent or semi-independent disability assessment bodies, separate from financial administration, to reduce potential conflicts of interest between assessment and benefits allocation. Albania’s framework, where municipal authorities handle payments, is common but should ensure clear separation between assessment and financial decisions. During the years it has been noted the move toward multidisciplinary commissions and centralized procedures aiming to reducing of fraud practices<sup>38</sup>. While this has increased the consistency of evaluation practices, it has increased bureaucracy and overwhelming administrative burden for persons with disabilities and their families.

[35] <http://qbz.gov.al/eli/ligj/2019/07/18/57>

[36] International Classification of Functioning, Disability and Health (ICF).

[37] Neni 30.

[38] CoM Decision No. 182, dated 26.2.2020, “On the determination of the amount, criteria, procedures, and documentation for the assessment and receipt of payments for persons with disabilities, as well as for the personal assistant.” (as amended).



- **CoM decision no. 722, date 11.11.2019 “On Determining the Measure, Criteria, Procedures and Documentation for the Assessment and Benefit of the Disability of Personal Assistants, and the Structures Responsible for Their Duties” (Amended by DCM No. 77, Date 2.2.2022)<sup>39</sup>.**

The decision was adopted to regulate the legal, institutional, and procedural mechanisms ensuring the implementation of the biopsychosocial model of disability assessment. It serves as a sub-legal act implementing the structural reform provided in the law no. 57/2019 “On Social Assistance” and the policy document “Reform of Disability Assessment in the Social Protection System and the Action Plan 2019–2024.”

In order to obtain disability status, applicants must cumulatively meet the following criteria:

- (i) Existence of a medically verified physical, mental, intellectual, or sensory impairment;**
- (ii) Proof of functional limitations in daily activities and social participation;**
- (iii) Existence of environmental and social barriers that restrict full integration;**
- (iv) Lack of entitlement to an invalidity or old-age pension under social insurance law.**

Financial support for beneficiaries includes a basic monthly payment of 150% of the social pension, with additional supplements for students and individuals with severe disabilities, as well as compensation for personal assistants. Certain groups, such as blind individuals and paraplegics/tetraplegics, are exempt due to existing specific legislation. The decision also mandates the State Social Service to regulate the operation of multidisciplinary commissions and repeals conflicting prior provisions.

This document is supplemented by the Guideline for the Biopsychosocial Assessment of Disability<sup>40</sup>. The guideline establishes the framework and procedures for assessing disability in Albania within a bio-psycho-social model, moving beyond purely medical impairment to include how the person functions in society and the barriers they face.

It defines the purpose of the assessment, the responsibilities of the central and regional control units, and the roles of the multidisciplinary assessment team. It outlines two types of control: full audits and thematic reviews. The process covers planning (annual plans, programs), fieldwork (visits, documentation), registration and reporting of results. It stipulates that the assessment must align with the World Health Organization’s ICF framework — considering bodily impairments, activity limitations, participation restrictions, and environmental factors.

[39] <http://qbz.gov.al/eli/vendim/2019/11/11/722>

[40] <https://www.sherbimisocial.gov.al/wp-content/uploads/2025/01/Metodologjia-e-kontrollit-te-vleresimit-Bio-Psiko-Social-te-afetise-se-kufizuar.pdf>



The methodology also specifies documentation requirements, verification of data, and outlines the monitoring and follow-up of beneficiaries. The aim is to ensure transparent, consistent, equitable assessment of persons with disabilities, reduce abuses in benefit schemes, and link support to real functional needs rather than only to diagnoses.

Finally, more transparent information on the Biopsychosocial Assessment of Disability is provided in a dedicated section of the **State Social Service** as well as through dedicated manual prepared for children and adult people.

- [Law no. 10221/2010, “On Protection Against Discrimination” \(as amended\)](#)<sup>41</sup>.

The law explicitly recognizes disability as a protected ground and prohibits all forms of discrimination—direct, indirect, harassment, and victimization—against persons with disabilities. It mandates public authorities, employers, and service providers to provide reasonable accommodation to ensure equal access and participation in employment, education, healthcare, social protection, and access to goods and services. Oversight and enforcement are entrusted to the Commissioner for Protection from Discrimination (CPD), who investigates complaints and can impose sanctions or recommend corrective actions. The law also allows for affirmative measures to promote equality, ensuring that persons with disabilities enjoy full protection and equal treatment in all areas of public and private life.

- [Law No. 111/2017, “On State-Guaranteed Legal Aid”](#)<sup>42</sup>.

The law aims to ensure access to justice for individuals unable to afford legal services, explicitly including persons with disabilities among its priority beneficiaries. It grants eligibility for state-guaranteed legal aid to persons with disabilities, particularly those receiving disability benefits or experiencing social and economic hardship.

Legal aid covers both primary services—such as legal information, advice, and document assistance—and secondary services, including representation before courts and institutions. The law also mandates that legal aid services be physically and communicatively accessible, providing measures like sign language interpretation and simplified information. Through the State Agency for Legal Aid, which collaborates with local authorities and NGOs, the law ensures effective outreach and accessibility, guaranteeing that persons with disabilities can exercise their rights and access justice without financial or physical barriers.

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[42] <http://qbz.gov.al/eli/ligj/2010/02/04/10221>  
[43] <http://qbz.gov.al/eli/ligj/2017/12/14/111>



Persons with disabilities in Albania face several challenges in accessing the benefits of Law no. 111/2017 “On State-Guaranteed Legal Aid.”

Many public offices and courts remain physically inaccessible due to the lack of ramps, elevators, or adapted facilities, and communication barriers persist because of the absence of sign language interpreters or information in Braille and simplified formats.

Awareness about the existence of free legal aid is limited (despite several efforts)<sup>44</sup>, as information campaigns are often not adapted to the needs of persons with disabilities. Furthermore, legal aid providers often lack specialized training on disability rights and appropriate assistance methods.

The State Agency for Legal Aid operates with limited staff and resources, especially in rural areas, and insufficient cooperation with organizations representing persons with disabilities reduces the effectiveness of services. In addition, bureaucratic procedures and administrative barriers make applying for aid difficult, while the lack of institutional coordination and support mechanisms hinders full and equal access to justice for persons with disabilities.

### **Government Political Program-Albania 2030**

The Government of Albania has formally pledged to enhance support for persons with disabilities by ensuring comprehensive access to education, employment, and public services.

This pledge involves substantially increasing financial assistance for children with disabilities (doubling the payments)<sup>45</sup>, linking these benefits with integrated services, and carefully reviewing personal assistance programs to provide more effective and inclusive support.

However, this political commitment requires close monitoring in practice, as implementation frequently lags the stated objectives.

[44] [https://adrf.al/images/publications/Udhezues\\_per\\_Ndihmen\\_Ligjore\\_Falas\\_ne\\_Gjuhe\\_te\\_Thjeshtuar.pdf](https://adrf.al/images/publications/Udhezues_per_Ndihmen_Ligjore_Falas_ne_Gjuhe_te_Thjeshtuar.pdf)

[45] Faqe 46.



- [Action Plan for Mental Health 2023-2026](#)

It sets out a robust framework to transform Albania's mental health services: moving from institutional care to integrated community care, strengthening prevention and promotion, ensuring leadership and governance, and building data/monitoring systems. The plan is structured around four strategic objectives:

**(i) Governance & leadership for mental health:** improving policy frameworks, institutional coordination and accountability;

**(ii) Community-based, integrated mental health and social care services:** expanding access to services outside just psychiatric institutions, and integrating with social care;

**(iii) Promotion and prevention:** increasing awareness of mental health, reducing stigma, targeting children & adolescents, risk-factors and early intervention;

**(iv) Strengthening information systems, data, monitoring & research:** ensuring there is good evidence, monitoring of implementation, evaluations, and financial sustainability.

The estimated cost of implementing the plan is about 3,500,774,000 All during period 2023-2026.

The plan includes measures such as building capacity in regional hospitals, hiring more psychologists and social-workers, integrating mental health into primary health care, and ensuring services are closer to communities.

# Annex B - REFERENCES



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# REPORT

**THE EFFECTS OF THE IMPLEMENTATION OF  
THE DISABILITY ASSESSMENT SCHEME BASED  
ON THE BIOPSYCHOSOCIAL MODEL**



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